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ABSTRACT

Within the framework of the Wisconsin Model for a Comprehensive K-12 Alcohol and Other Drug Abuse (AODA) Program, this curriculum guide is designed to help students develop information and personal, interpersonal, and social system competencies as they explore fundamental principles related to alcohol and other drug abuse. The guide begins by laying a foundation of assumptions about the nature of learning in general and of learning about alcohol and other drugs in particular. It then presents sample lessons, student activities, and journal writing suggestions that reflect those assumptions. The guide outlines a method of developing and delivering an AODA curriculum designed to help educators think about their beliefs and assumptions concerning AODA education; communicates goals and competencies; illustrates fundamental principles and corresponding content areas as well as related student outcomes; provides an alternative method of developing and delivering AODA instruction; suggests a method of curriculum implementation; describes methods of integrating AODA instruction with other AODA program components and K-12 subject areas; and provides resources for curriculum development and implementation. Twenty-five appendices comprising half the document include: (1) hints for teachers on how to work with students in groups, promote critical reading and thinking, and assess student achievement; (2) a curriculum matrix for grades K-1, 2-4, 5-8, and 9-12; (3) Wisconsin Statutes and Administrative Rules that affect AODA programs; (4) a list of printed resources and state and national organizations concerned with substance abuse; (5) a list of 31 publications, 16 media products, 15 newsletters, and 5 associations on critical thinking; and (6) a list of local and state organizations concerned with educational equity. (LL)

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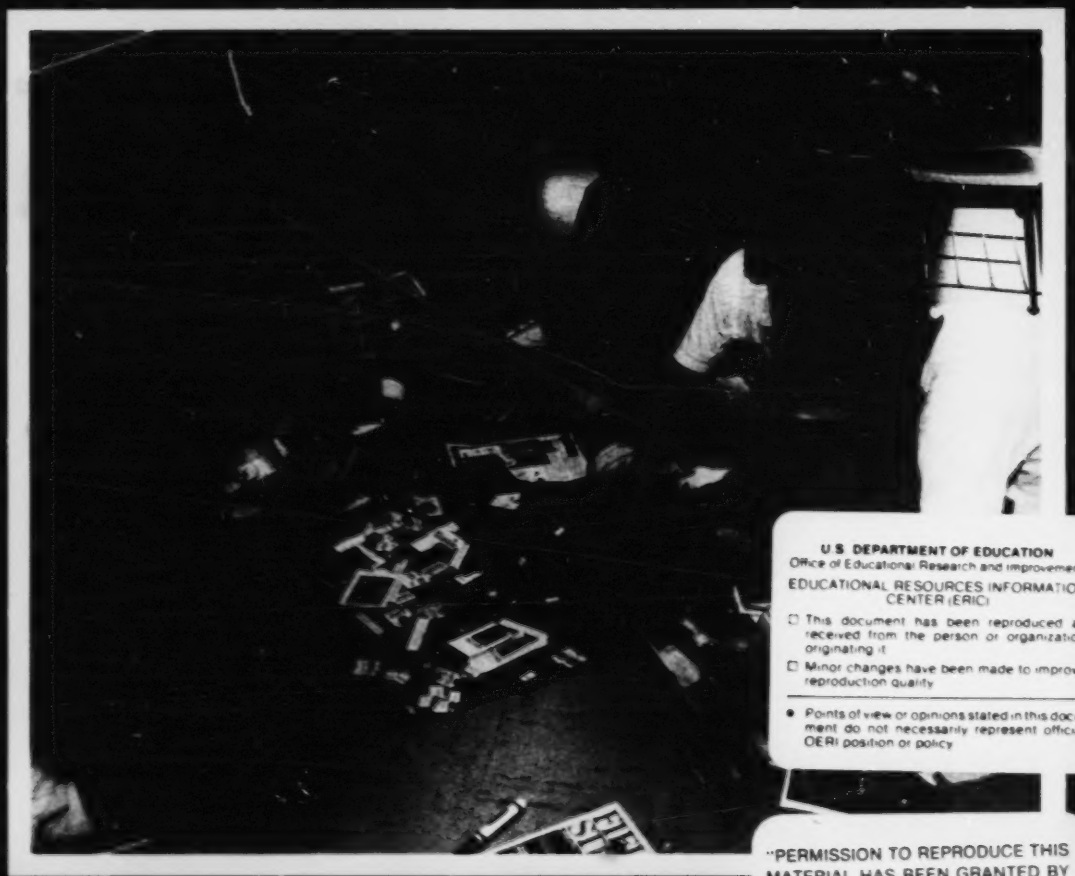

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Foreword

Promoting drug-free lifestyles for youths requires a three-part approach, according to the Wisconsin Model for a Comprehensive K-12 Alcohol and Other Drug Abuse Program. The model calls for curriculum, programs for students, and collateral programs for adults.

The Wisconsin Model was developed by a group of Wisconsin school and AODA leaders organized by the Wisconsin Department of Public Instruction. The model is described in detail in a department publication, *Alcohol and Other Drug Abuse Programs: A Resource and Planning Guide.* This curriculum guide is an extension of that resource and planning guide.

Although curriculum alone won't equip young people to reject the alcohol and other drug abuse hampering the development of so many youths, it must be the first part—and the cornerstone—of a comprehensive program.

What should an AODA curriculum consist of? The answer can be found in the pages that follow. The curriculum the authors envision is designed to help students develop information, personal, interpersonal, and social system competencies as they explore four fundamental principles related to AODA prevention. The fundamental principles follow:

- To varying degrees, people have the ability to influence and to be influenced.
- Personal choices have consequences for oneself and for others.
- Society has a responsibility to set reasonable boundaries that are in the best interest of all members.
- Each person has the responsibility to promote the health and safety of oneself and others.

Believing that instruction methods are as important as curriculum content, this guide begins by laying a foundation of assumptions about the nature of learning in general and of learning about alcohol and other drugs in particular. Sample lessons and student activities reflect those assumptions.

Many of the assumptions address the student's role in the learning process. Recognizing the role of students, each lesson features a portfolio or journal activity. The portfolios that students develop demonstrate the knowledge they have been able to integrate into their daily lives.

We're confident this guide will answer many fundamental questions that arise when developing an AODA curriculum. What will we teach? When? How? Some of the work has been started. Yet much remains to be done. Before any of the work can benefit Wisconsin students, we need you to bring the material to life for the students.

I encourage you to do just that—work with the curriculum and students toward creating an understanding of the serious affects of abusing alcohol and other drugs. We look forward to hearing about how the guide works for you and your students.

Herbert J. Grover
State Superintendent of Public Instruction

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Margaret J. Wilsman
Director of Research
Wisconsin Educational Communications Board

Judy Rabak-Wagener
Private Health Education Consultant
Madison, WI

Numerous Wisconsin K-12 educators also provided constructive comments and suggestions in the development of this guide. Consideration of AODA curriculum was initially begun as a component of the DPI publication *Alcohol and Other Drug Abuse Programs: A Resource and Planning Guide.* Members of the original task force and the organizations they represented at the time of their involvement were: Mark Berg, Platteville School District; Roxanne Bornemann, Antigo School District; Mary Burchby, Northland Pines School District; Rosemary Doyle, Northwood School District; Dan Duquette, University of Wisconsin-LaCrosse; Michelle Ferris, Kaukauna School District; Terry Gilman, Winnebago County Department of Community Programs; Harold Goetz, Kaukauna School District; Candy Harshner, Lakeland Council of AODA Inc.; Mary Herrmann, Appleton School District; Sara Krebsbach, Wisconsin Department of Health and Social Services; Peggy Lind, Cooperative Educational Service Agency 11; Bonnie Lyons, Northland Pines School District; Dan Malesevich, Winnebago Mental Health Institute; Linda Martin, Monona Grove School District; Kathy Medeke, Platteville School District; Joan Moen, LaCrosse School District; Sherry Mousseau, Oneida Tribal School; Pat Schuetz, Wisconsin Rapids School District; Carol Troestler, Pathway Center, Prairie du Sac; Joe Wieser, New Holstein School District; and Doug White, Wisconsin Clearinghouse.

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Introduction

Historic Perspective
The Wisconsin Model for a Comprehensive K-12 AODA Program
The Plan of the Guide
Curriculum Goals
Curriculum Competencies
Summary

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Historic Perspective

Effective prevention of alcohol and other drug abuse (AODA) and its related problems is of continuous concern to society. In response, various prevention models have been developed in the hope that they would provide workable solutions. These historical models of prevention are important to review for several reasons.

First, these models illustrate the reasoning of western society as it addresses the question of what should be done concerning AODA. From simplistic information models through psychosocial and social-influence models, society's understanding of the complexity of AODA and related issues is increasing. As each model developed, another set of societal assumptions concerning the essential elements of effective prevention programs was linked to previous knowledge and experiences. Therefore, the history of prevention also provides insight into American culture's growth in understanding of alcohol and other drug abuse.

The history of prevention also provides insight into American culture's thinking and growth in understanding of alcohol and other drug abuse.

Second, current educators' formal AODA training likely has been based on one or more of these models, and therefore these models influence the way today's educators present AODA information to students. A summary of other models may help teachers reflect on why they are presenting AODA information from a particular perspective and how that perspective compares to other AODA prevention efforts.

And finally, it is important for educators to recognize the different viewpoints of colleagues, administrators, and parents when these individuals express opinions about what ought to be done in school AODA prevention programs.

With these ideas in mind, the following is a brief overview of the common prevention approaches most often utilized to address the problem of alcohol and other drug abuse. Also included are the underlying assumptions or beliefs that practitioners of the various models hold. These assumptions influence prevention practitioners to choose a particular model or strategy.

Information Model

The information model of prevention is based on the assumption that knowing accurate facts about alcohol and other drugs and their negative effects is enough to prevent a person from using these substances. In some cases, prevention programmers exaggerate the negative consequences and as a result seriously damage their credibility to students. Not surprisingly, efforts based only on information have not been proven effective and in some instances actually resulted in increased use by youth. (Bell-Bolek and Jones, 1986; U.S. Dept. of Health and Human Services, 1987)

Affective Education Model

The basic assumption of this model is that prevention programs can promote wise decision making by enhancing a positive sense of self-esteem in students. (U.S. DHHS, 1987) As a result, prevention efforts focus on activities that help students better understand themselves, express their feelings appropriately, and make decisions in their best interest. This

values-clarification approach, by itself, is no more successful in preventing AODA than the information model. (Goodstadt, 1974; Goodstadt, 1978; Swisher and Hoffman, 1975; Swisher, 1979)

Social Influence Model

The social influence model is based on the belief that it is possible to inoculate students against negative social influences that promote alcohol and other drug abuse. To achieve that end, prevention programs raise student awareness of existing social pressures, provide them with skills to resist or counteract these influences, and correct misinterpretations of the extent of the problem in society. (U.S. DHHS, 1987) This approach has shown greater success than other models, most specifically with anti-smoking campaigns. (Battejas, 1985)

Personal and Social Skills Training Model

Prevention programs geared toward personal and social skills training include and expand on the social influence model. With philosophical foundations in the social learning and problem behavior theories (Bandura, 1969; Jessor and Jessor, 1977), this approach assumes that alcohol and other drug abuse is a learned behavior and a product of modeling and reinforcement. Prevention strategies to combat these influences attempt to not only provide youth with specific skills but also to reduce their motivation to use alcohol and other drugs. (Hawkins et al, 1986)

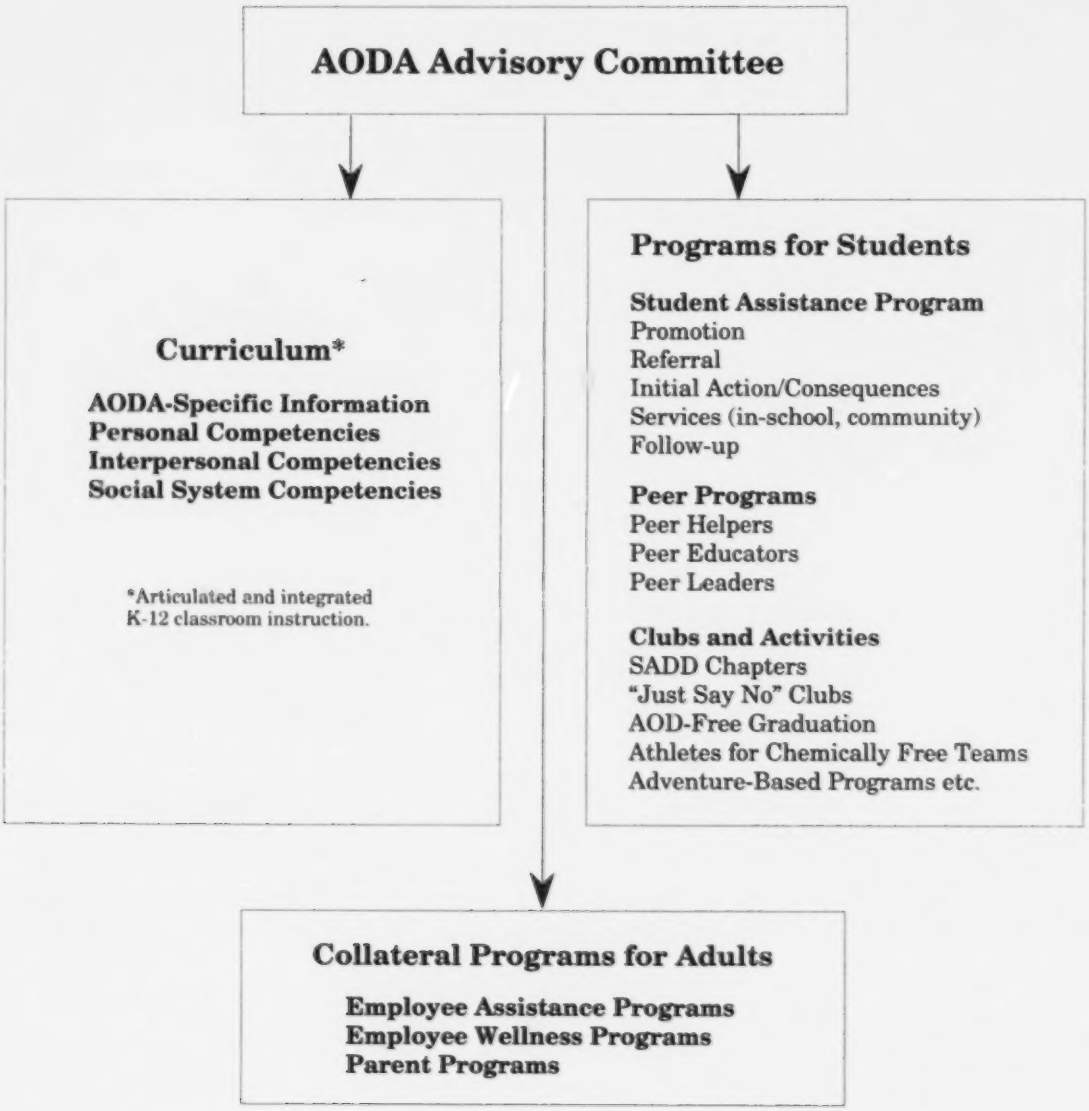
The Wisconsin Model for a Comprehensive K-12 AODA Program

The Wisconsin Model for a Comprehensive K-12 AODA Program follows the recommendations of some of the most recent research and combines elements of the various models of AODA education previously described. The Wisconsin Model includes three components, the first of which is instructional—an in-class AODA curriculum for every student in every grade in the school district (see Figure 1). The instructional component is of utmost importance.

The second component in the Wisconsin Model is a cluster of student programs, including a Student Assistance Program (SAP), peer programs, and special clubs and activities. These two components, curriculum and student programs, provide the foundation of a comprehensive AODA program in the school. As adjuncts to these, collateral programs for adults—such as an Employee Assistance Program (EAP), employee wellness programs, and parent programs—support the student programs and constitute the third component of the Wisconsin Model. While this guide specifically deals with the curriculum component of the Wisconsin Model, the other components—programs for students and collateral programs for adults—are detailed in the Wisconsin Department of Public Instruction publication *Alcohol and Other Drug Abuse Programs: A Resource and Planning Guide.*

Figure 1

The Wisconsin Model for a Comprehensive K-12 AODA Program



Wisconsin AODA Curriculum Model

Educators familiar with cognitively guided instruction in mathematics, the "whole language" movement in English, and new recommendations on effective science practices issued by the National Center for Improving Science Education may see many parallels between those educational movements and the curriculum described in this guide. The Wisconsin AODA Curriculum Model is strongly influenced by the constructivist view of learning, which emphasizes the importance of the learner's active construction of knowledge and the interplay between new knowledge and the learner's prior knowledge. (O'Neil, 1992; Wheatley, 1991; McFadden, 1991) Students in classrooms structured for constructivist learning weigh new information against previous understanding (their own and others), and come to a new understanding of the lesson content.

The constructivist view of learning not only recognizes the role played in learning by students' misconceptions or naive theories but also the role played by attitudes, beliefs, and values that may cause distortions in what is learned or cause students to wear blinders, so to speak, that hinder their ability to learn. Recently, work has been done by Sheila Tobias to demonstrate the way in which learning mathematics is affected by the students' preferences to use particular kinds or prior knowledge they and their classmates hold. For example, some students need to talk through the new learning in terms of its historical origins, analogies, and metaphors that they and others might use to understand the particular mathematical concept.

The constructivist view of learning not only recognizes the role played in learning by students' misconceptions or naive theories, but also the role played by attitudes, beliefs, and values that may cause distortions in what is learned or cause students to wear blinders, so to speak, that hinder their ability to learn.

While it is important that the teacher, principal, and other instructional staff members understand the impact that prior knowledge, in its fullest sense, has on learning, it is also important that the students eventually understand the impact of their prior knowledge if the goal of instruction is to equip students with self-directed learning capacities. Some educators in cognitive psychology have developed rather complete theories and practices related to assisting students to become competent in using what are called cognitive learning strategies to guide their own self-directed learning. (Pressley, M., et al, 1989)

The model of alcohol and other drug abuse education described in this book incorporates many of the prevention assumptions discussed earlier in this chapter. However, there are additional assumptions about the nature of learning in general and of learning about AODA in particular, that when applied, significantly alter an educator's approach to teaching about AODA. These assumptions are vital to any curriculum development effort in which the goals for students include an attempt to influence their attitudes and behavior.

Underlying Assumptions Concerning All Educational Programs

- It is better to take more time to teach fewer concepts than a small amount of time to teach many concepts.
- Students become more self-reflective about their thinking by listening to others explain their thinking and experiences.

- Learning is student centered and practice based.
- Learning occurs in both teachers and students.
- Information is shared and knowledge is constructed between students and teachers; it is not delivered by the teacher to the students or by students to other students.

Underlying Assumptions Concerning AODA Education

- Students bring to the classroom individual beliefs and abilities as a result of previous AODA-related experiences.
- Students' previous AODA experiences are fundamental to new learning on this topic.
- At any given time, the content of AODA instruction has varying degrees of relevance for students.
- Because learning and adopting healthy AODA behaviors is not a linear process, it is unrealistic to expect students to experience an orderly and cumulative assimilation of knowledge.
- It is not easy for students to maintain a drug-free lifestyle. Therefore, specific skills and social conditions should be fostered to decrease negative influences for all students.
- Establishing positive attitudes about alcohol and other drugs requires that students practice taking action concerning these attitudes related to alcohol and other drugs.
- To develop new or reinforce existing positive attitudes and behaviors regarding alcohol and other drugs, students need to develop the ability to be self-reflective about consistency between attitudes and behaviors.
- Effective teachers model self-reflection regarding alcohol and other drugs in order to be authentic in their teaching.
- Effective teachers model a willingness to practice actions that promote positive attitudes and behaviors concerning alcohol and other drugs.
- Teachers' experiences regarding alcohol and other drugs influence the way AODA lessons are presented to students.
- Parents and community members influence the degree of success or failure of prevention education.
- AODA education not only teaches personal responsibility in relation to alcohol and other drugs, it also encourages students to become advocates for AODA programs and services.

Consistent application of these assumptions in the instructional process has a profound effect on the way AODA concepts are communicated to students.

Contrasting Instructional Methods

Consistent application of these assumptions in the instructional process has a profound effect on the way AODA concepts are communicated to students. Likewise, the effect carries over into the expectations educators have for students and the methods they use to assess student achievement.

The following case studies describe two methods for teaching the same AODA concept. The first method is based on traditional assumptions about AODA prevention, and the second method incorporates the assumptions that govern the Wisconsin AODA Curriculum Model.

Method One

In a seventh-grade health class, the teacher provides students with a chart listing various drugs with corresponding spaces to record the drugs' effects and risks. Students are directed to complete their worksheets as the teacher lectures on the topic.

When the teacher completes the lecture and the student's worksheets are finished, the students discuss their answers as a large group to check their work. Students use the information on their worksheets to create a drug information pamphlet for younger students.

This method is based on the assumptions that the teacher is the primary source of information, information is delivered by the teacher to the student, and accurate facts about drugs and their effects and risks will deter students from using those substances.

Method Two

In another seventh-grade class, the teacher asks students to think about and write down what they currently understand about the effects and risks of using certain drugs. Students also are asked to think about where and how they learned this information. This current knowledge is recorded in a journal or portfolio kept by each student.

The students discuss the extent of their current knowledge of drugs and their effects, including inconsistencies among students' understanding, gaps in knowledge, and similarities and differences among sources. Students discuss what constitutes a reliable source of AODA information and generate a list of available sources for obtaining the knowledge currently missing.

In groups, the students collect and record the missing information. On a master handout displayed on an overhead or chalkboard, the teacher records the facts that students provide regarding drug effects and risks. Students who volunteer a fact must justify their source and information as accurate and reliable. Students finding contradictory knowledge may challenge the information and sources presented. The class reaches a consensus on the master list of effects and risks.

A large-group discussion about these questions follows.

- Based on this exercise, what are reliable sources of AODA information?
- Are these the sources that we most often use in daily life?
- How can we check the knowledge we accumulate about alcohol and other drugs for myths or other misinformation?
- What might be some consequences of not checking the accuracy of the knowledge we acquire?

Students then record in their journal or portfolio their thoughts on these questions.

- For whom am I a source of AODA information?
- Do I provide that person with reliable, accurate information? Explain.
- Is the information I relay to others with my words and actions consistent? Does it promote positive choices? Explain.

For the remainder of the semester, students continue to observe the sources of AODA information that they are willing to accept as true on face value. Students record examples of times they critically analyze AODA information sources as well as times they accept information with little or no thought. Students evaluate their ability to distinguish between accurate and inaccurate sources and information.

The Plan of the Guide

This guide outlines a method of developing and delivering an AODA curriculum that is consistent with the assumptions previously described. It is designed to

- help educators think about the beliefs and assumptions they hold concerning AODA education and how those beliefs and assumptions influence curriculum development and delivery.
- clearly communicate the goals and competencies that are important to help youths develop through reasoned, assimilation-based AODA instruction (Chapter 1).
- illustrate the fundamental principles and corresponding content areas as well as related student outcomes to be included in K-12 AODA education (Chapter 2).
- provide an alternative method of developing and delivering AODA instruction that is consistent with current educational research (Chapter 3).
- suggest a method of curriculum implementation using the Wisconsin Model for a Comprehensive K-12 AODA Program (Chapter 4).
- describe methods of integration of AODA instruction with other AODA program components, with other K-12 subject areas, and with the community (Chapter 5).
- provide resources to use in curriculum development and implementation (Chapter 6).

Curriculum Goals

Curriculum, when combined in an intensive and coordinated manner with other school, family, and community strategies, can help prevent and intervene in alcohol and other drug abuse and related problems. In order to do this, the curriculum moves beyond cognitive learning to a level of learning that influences behavior and attitudes.

AODA Curriculum Goals

The overall goal of AODA curriculum is to develop the behaviors, skills, attitudes, and knowledge that help students prevent or minimize problems related to alcohol and other drugs throughout their lifetime. Specifically, students will

- adopt behaviors and attitudes that promote a healthy lifestyle.

- not use alcohol or other drugs. This means not using tobacco, alcohol, or any other drugs illegal for youth. Some exceptions may include medicines and religious rituals.
- avoid AODA-related problems resulting from the abuse of alcohol or other drugs by themselves and others.
- seek help when needed for AODA-related problems such as alcohol or other drug abuse in the family.
- recognize and effectively assist others with AODA problems to seek help.
- support or actively participate in efforts to prevent, intervene, and treat AODA problems in their communities and, when appropriate, in other people.

Curriculum Competencies

To reach these goals, students need a broad base of knowledge and skills. To help ensure a broad perspective in content, this curriculum is designed to help the student develop four types of competencies: AODA information, personal skills, interpersonal skills, and social system skills.

AODA Information

Definition

AODA information includes the accurate facts and critical concepts to be understood about alcohol and other drugs and their relation to mental, emotional, and physical health and well-being.

Rationale

Students need to base health-related choices, in part, on accurate and current information about alcohol and other drugs, the wide range of effects of alcohol and other drugs, and AODA-related risk factors. This information also forms the basis for development of personal, interpersonal, and social system competencies. Students need to explore sources of AODA information and sources of help for AODA-related problems to continue learning and to prevent or intervene with early AODA problems. Without the ability to distinguish accurate from inaccurate AODA information, students may accept myths and misinformation as facts, making them more likely to be vulnerable to social influences leading toward use, misuse, or abuse.

Personal Competencies

Definition

Personal competencies are the skills people use to become more aware of the ways in which they personalize AODA facts and situations. Students using personal competencies become better skilled in thinking about how individual and socio-cultural characteristics and experiences affect their tendencies to accept or ignore AODA information. The focus is on incorporating AODA knowledge with knowledge about the self, processing knowledge using individual skills, and applying knowledge to one's personal life.

Rationale

Research in the field of AODA has searched for a correlation between the lack of personal competencies, alcohol and other drug abuse, and resulting problems. There is some evidence that knowledge and skills, when specifically connected and applied to AODA issues, will enhance an individual's chance of avoiding personal AODA problems and leading a healthy and productive life. Personal AODA competencies help form the foundation for broader, more complex AODA interpersonal and social system competencies.

Interpersonal Competencies

Definition

These competencies, essential in developing respect for self and others, include the knowledge and skills people need to assess themselves in relation to others. They help students assess the positive and negative influences they may be having on other people in AODA-related situations. In addition, they strengthen students' abilities to examine the influences of relationships within and outside the family on their own AODA-related behaviors.

Rationale

Interpersonal competencies enable people to build healthier and stronger relationships among friends and family members. A foundation for developing important interpersonal competencies can help students promote positive and limit negative peer and family influences. Students develop an understanding of the influence peers and family members have in their decisions and perceptions regarding alcohol and other drugs. Development of specific skills helps students make appropriate life choices regardless of outside influences.

Social System Competencies

Definition

These competencies include the knowledge and skills people use to assess themselves, in relation to AODA concerns, according to the social systems within which they operate. The term social systems refers to broader social groups, not only immediate peers and family, but also the school system, ethnic and cultural groups, the community, and society in general. Important aspects of these systems include norms, policies, and laws.

Rationale

Social systems are a part of the continuum of knowledge and skills that encompasses personal and interpersonal competencies. It is important for students to understand these broader social systems that contribute to knowledge, attitudes, and behaviors regarding alcohol and other drugs. An example of a social system competency is the ability to identify the aspects

of a small town's culture that influence its citizens' attitudes and behaviors regarding alcohol and other drugs. Gaining insight into the influences of social systems increases the students' abilities to make informed decisions regarding alcohol and other drugs throughout their lives.

Summary

As an educator, it is tempting to simply believe "if I cover it in class, they will learn." The competencies described above do not become a part of students' or anyone's lives simply by raising their awareness. Those who have tried to modify their own behavior or attitudes know that change comes in small increments, over long periods of time, and with dedicated effort. Progress is made and lost and, in time, made again. School systems that recognize this and apply it to instruction, particularly AODA instruction, have genuine potential to help students lead drug-free lives.

As an educator, it is tempting to simply believe "if I cover it in class, they will learn."

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K-12 Fundamental Principles, Content Areas, and Related Student Outcomes

Conceptual Framework
Fundamental Principles
Content Areas
Student Outcomes
Summary

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Conceptual Framework

The Wisconsin AODA Curriculum Model reaches beyond cognitive understanding of concepts to encourage incorporation of fundamental principles into students' everyday lives. That expectation demands an alternative view of curriculum, instruction, and student assessment.

Fundamental Principles

The curriculum goals described in Chapter 1 are the types of attitudes and behaviors desirable for all members of society. To achieve these attitudes and behaviors, all members of society must accept four fundamental principles. Figure 2 illustrates how the AODA curriculum content flows from its goals. Achieving curriculum goals means that students accept four fundamental principles that may help motivate them to take action toward an ideal.

The fundamental principles are human development issues.

- To varying degrees, people have the ability to influence and to be influenced.
- Personal choices have consequences for oneself and for others.
- Society has a responsibility to set reasonable boundaries that are in the best interest of all members.
- Each person has the responsibility to promote the health and safety of oneself and others.

The fundamental principles are human development issues. Acceptance of these beliefs is basic not only for AODA prevention but for prevention of problems such as human immunodeficiency virus (HIV), acquired immune deficiency syndrome (AIDS), teen pregnancy, school violence, sexual assault, and eating disorders.

Content Areas

The curriculum is designed to help students examine the four fundamental principles in depth. Thus, content is grouped within corresponding areas: influences on AODA conceptualization, effects of alcohol and other drug abuse, rules about alcohol and other drugs, and keeping safe from alcohol and other drug abuse.

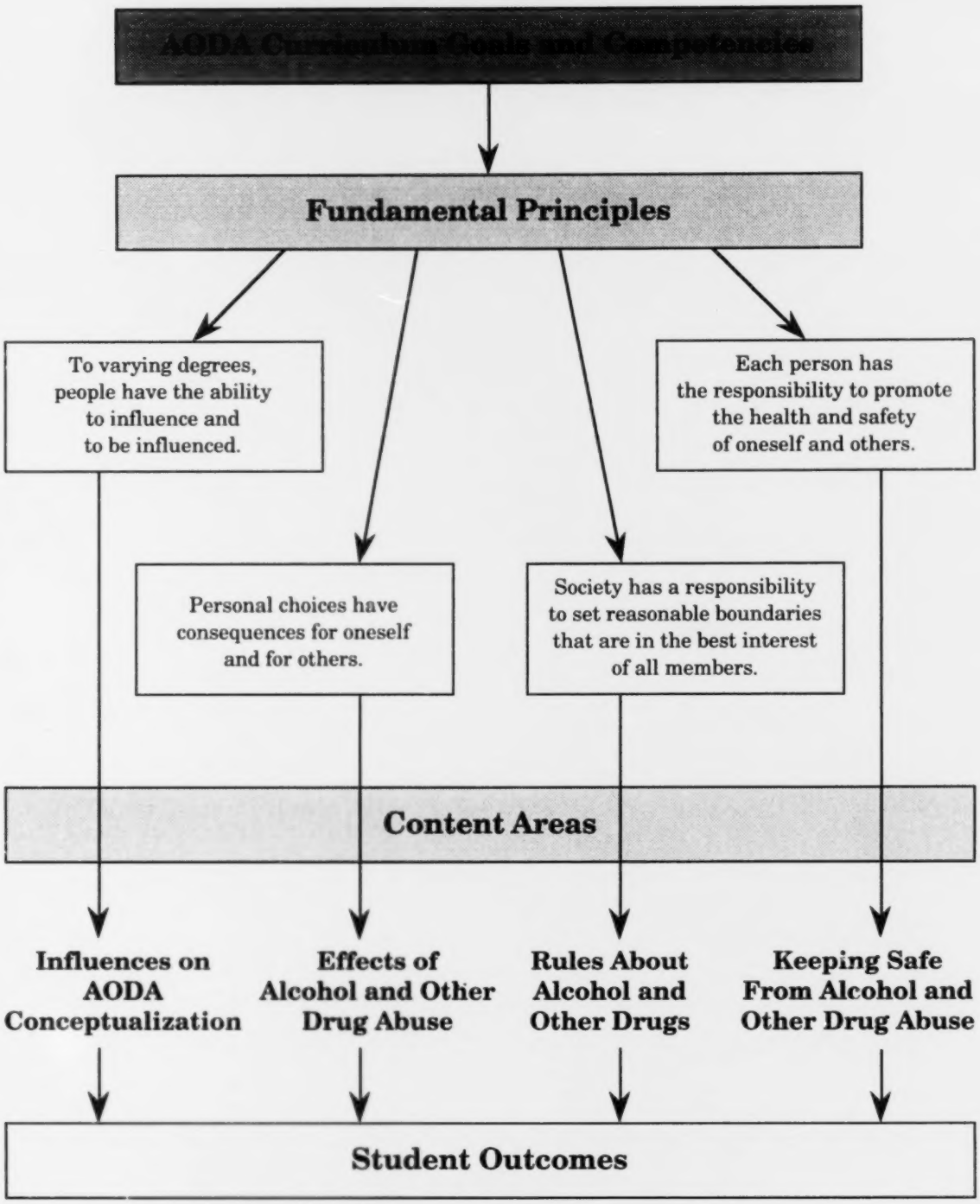
Influences on AODA Conceptualization

Corresponding fundamental principle: To varying degrees, people have the ability to influence and to be influenced.

Content in this area deals with the internal and external influences that shape individual beliefs about alcohol and other drug abuse. It is important that lessons explore the students' existing beliefs and the various sources of those beliefs. Students also examine the credibility of sources and the criteria they use to label sources as reliable or unreliable. An additional and

Figure 2

K-12 AODA Curriculum


AODA Curriculum Goals and Competencies
Fundamental Principles
To varying degrees, people have the ability to influence and to be influenced.
Personal choices have consequences for oneself and for others.
Society has a responsibility to set reasonable boundaries that are in the best interest of all members.
Each person has the responsibility to promote the health and safety of oneself and others.
Content Areas
Influences on AODA Conceptualization
Effects of Alcohol and Other Drug Abuse
Rules About Alcohol and Other Drugs
Keeping Safe From Alcohol and Other Drug Abuse
Student Outcomes

sometimes neglected goal is to help students examine their roles as sources of influence for others. Lessons in this area help students critically reflect on the manner in which they construct their beliefs about alcohol and other drugs and trace the development of this conceptualization process throughout the course of their schooling from kindergarten through grade 12.

Effects of Alcohol and Other Drug Abuse

Corresponding fundamental principle: Personal choices have consequences for oneself and for others.

This content area emphasizes the individual's understanding of the physical, emotional, and societal effects of alcohol and other drug abuse. These effects are explored in relation to the individual student, his or her family and peer group, the school, the local community, and the national and international communities. The lessons take the student beyond the traditional memorization of drugs and their effects to a greater understanding of the complexity of AODA effects which necessitate solutions that reach beyond a "just say no" slogan.

Rules About Alcohol and Other Drugs

Corresponding fundamental principle: Society has a responsibility to set reasonable boundaries that are in the best interest of all members.

Content related to rules is designed to help the student understand the limits that have been set by the student; his or her family; peer groups; school; and local, national, and world communities in relation to alcohol and other drugs. Furthermore, the student develops an ability to compare and contrast the various rules these different groups establish at various points in time and among various cultures without bias or stereotyping. The student learns to judge the value of rules in terms greater than personal preference. The degree to which rules promote personal and societal well-being, are within the realm of the law, and contribute to the greater good of society also are considered. Students are encouraged to explore the consequences of breaking rules related to alcohol and other drugs and examine their personal ability to follow the limits established for them concerning alcohol and other drugs.

Keeping Safe from Alcohol and Other Drug Abuse

Corresponding fundamental principle: Each person has the responsibility to promote the health and safety of oneself and others.

Students completing lessons related to this area develop the ability to evaluate the skills they possess or must develop to prevent alcohol and other drug abuse. The lessons provide an opportunity for students to evaluate their use of personal skills and abilities and to identify new skills they are willing to practice and use in real-life AODA-related situations. At the highest level of learning, students are able to relate the relevance of these skills to other at-risk situations such as teen pregnancy, school violence, and suicide.

Figure 3 — K-12 Student Outcomes

Grades	Influences on AODA Conceptualization
K-1	A. What have I learned, in and out of school, about alcohol and other drug abuse (AODA)? B. Where and how has this AODA information been learned? C. What are my words and actions teaching others about alcohol and other drugs?
2-4	A. What new ideas am I learning about alcohol and other drug abuse? B. Where and how has this new AODA information been learned? C. What beliefs about alcohol and other drug abuse do I hold that might be biased or stereotyped? D. How do my beliefs about AODA and my sources of AODA information compare to those I held in earlier grades? E. What are my words and actions teaching others about alcohol and other drugs? F. How do my words and actions concerning alcohol and other drug abuse compare with what others are teaching me? G. What is peer pressure? What distinguishes good pressure from bad pressure? H. Can peer pressure be both good and bad at the same time? Explain. I. How do I use peer pressure to my advantage? J. How does my use of peer pressure affect others? K. How much of what I learned about alcohol and other drugs in earlier grades do I use in my everyday life?
5-8	A. What are my beliefs and attitudes about alcohol and other drugs? B. What are my most valued sources of AODA information and influence? C. Are my beliefs, including stereotypes and biases, enabling me and others to deny or see the truth about AODA? D. How do my beliefs, including stereotypes and biases, influence my behavior regarding alcohol and other drugs? E. For whom am I a valued source of AODA information and influence? F. What are my least valued sources of AODA information and influence? G. What is my criteria for deciding to believe or reject AODA information? H. How much has what I already have learned about alcohol and other drugs influenced my behavior and attitudes regarding AODA?
9-12	A. What current economic, cultural, and social factors promote alcohol and other drug abuse? B. To what extent have tobacco, alcohol, and other drugs permeated my culture and community? C. How has this permeation of tobacco, alcohol, and other drugs influenced the way I demonstrate that I am becoming more adult? D. What concept of adulthood are others demonstrating for me? E. What concept of adulthood am I demonstrating for others? F. How does my use or nonuse of alcohol and other drugs enhance or detract from my sense of self-worth, sexuality, and gender identity? G. How do my family's and friends' views and practices regarding alcohol and other drugs affect my behavior? H. What stages has my thinking gone through since kindergarten regarding alcohol and other drugs?

Effects of Alcohol and Other Drug Abuse

A. What are the similarities and differences among foods, medicines, drugs, and poisons based on their effects and the conditions in which they are used?
B. How do I decide which foods, medicines, drugs, and poisons are good or bad for me?
C. What are examples of the effects of foods, medicines, drugs, and poisons that can be immediately seen or happen more slowly over time (visible and invisible effects)?

A. How do alcohol and other drugs affect the mind and body?
B. How do I distinguish between positive, negative, or mixed effects of alcohol and other drugs?
C. When might the bad effects of alcohol and other drugs seem good to a person?
D. What are alternative ways to feel good without using alcohol and other drugs?

A. How has other people's use of alcohol and other drugs affected me?
B. What new AODA effects am I aware of now that I am older?
C. How are effects of alcohol and other drugs on mind and body related to individual differences (such as age, weight, or gender)?
D. How does alcohol and other drug abuse affect family and peer relationships?
E. What impact has AODA had on our school and community?
F. What effect has AODA had on the activities my friends and I do together?
G. What effects of alcohol and other drugs signal misuse, abuse, or dependency?

A. How do parents' choices regarding alcohol and other drugs affect their children?
B. How does a person's alcohol and other drug use affect others? Misuse? Abuse? Nonuse?
C. How does alcohol and other drug nonuse, use, misuse, and abuse affect a person's style of thinking or ability to think?
D. How are these effects on thinking addressed in treatment and recovery?
E. How do effects of alcohol and other drugs on the mind and body change if drugs are combined with one another or with other substances?
F. What effect has AODA had on our city, state, nation, and world?

Rules About Alcohol and Other Drugs

What rules exist for me regarding foods, medicines, drugs, and poisons ?
How did I learn these rules? Do I follow them?
Do all families and individuals have the same rules about foods, medicines, drugs, and poisons ? Explain.
Why do rules exist about foods, medicines, drugs, and poisons ?

What are similarities and differences in the rules set by me, my family, my school, and my community regarding alcohol and other drugs?
Do I keep these rules in all circumstances? Explain.
Why are some rules about alcohol and other drugs broken?
What are consequences of breaking rules related to alcohol and other drugs?
Is it ever right to break a rule? Why do rules exist if people can and do break them?
Why can I hold healthy beliefs and accurate knowledge about AODA and yet fail to follow rules?

What criteria do I use to label rules (including AODA rules) as fair or unfair?
How do labels influence my ability to follow rules?
How do consequences for breaking specific AODA rules change as people get older?
How might alcohol and other drugs affect my ability to follow the rules my family, friends, school, and community have set for me?
How might alcohol and other drugs affect my ability to follow the rules I have set for myself?
What changes are occurring in the rules that my peers, family, school, and community set for me concerning alcohol and other drugs?
How do my rules concerning alcohol and other drugs compare with rules for these substances in other cultures and communities?
How do my internal rules differ regarding tobacco, alcohol, and illegal drugs?
What are some spoken and unspoken rules regarding tobacco, alcohol, and other drugs?
Are all rules about alcohol and other drugs consistent among situations, people, and groups? Explain.

What process do I now use to set rules for myself concerning alcohol and other drugs?
How does this process compare with the way I established rules for myself when I was younger?
Do my rules about alcohol and other drugs allow me to make positive choices for myself?
Do my rules about alcohol and other drugs affect others positively, negatively, or in a mixed way?
What are my internalized rules for alcohol and other drugs?
How do these rules compare with previous rules and with external rules?
What is the basis of the school's, community's, and society's thinking that generated current laws and policies related to alcohol and other drugs?
How can a person differentiate norms from rules and laws related to alcohol and other drugs?
What are the implications for myself and others if the majority of people in society choose to ignore rules and laws related to alcohol and other drugs?
What are the legal consequences for me of ignoring rules and laws related to alcohol and other drugs?
What are justifiable criteria for judging the fairness of rules, laws, policies, and norms related to alcohol and other drugs?
If rules, laws, policies, and norms related to alcohol and other drugs are proven unfair, what is the appropriate response for individuals and society?

Keeping Safe From Alcohol & Other Drug Abuse

A. What feelings do I have that I label as good, bad, or mixed?
B. Who can help me when I'm feeling bad or confused?
C. What do I know and what do I do to keep myself safe and healthy?

A. What is a risk?
B. What criteria do I use to label the risks I take as positive or negative?
C. How do I keep safe and healthy and still take risks?
D. What personal skills do I have or need to develop to stay away from unsafe risks?
E. What are my personal traits that make it difficult for me to stay safe and healthy?
F. What people, programs, and organizations in my school and community help people who have AODA-related problems?

A. What skills and attitudes am I practicing to keep myself safe and help others keep safe from AODA?
B. What myths about AODA risks are promoted culturally? By my peers? By me?
C. What groups, individuals, or organizations can help me assess my risk or others' risks for AODA?
D. What is the danger in denying personal risks for AODA?
E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?
F. How do alcohol and other drugs affect my ability to keep myself and others safe and healthy?
G. What responsibility to others do I have to make safe choices about alcohol and other drugs?
H. What social systems exist to
   • develop positive skills and attitudes in citizens?
   • help those with AODA-related problems?
   • intervene with problems?

A. What skills and attitudes have I developed that help keep me and others safe and healthy in relation to AODA?
B. How consistently do I apply these skills and attitudes in AODA-related situations?
C. What kind of support do I need to help me consistently use these skills and attitudes?
D. How have my skills and attitudes improved as I've gotten older?
E. How do these skills and attitudes affect my risk of
   • becoming infected with the human immunodeficiency virus (HIV) or other sexually transmitted diseases?
   • having a child with fetal alcohol syndrome?
   • becoming a victim or perpetrator of sexual violence?
   • being involved in an unplanned pregnancy?
   • dropping out of school?
   • breaking the law?
F. How can I foster positive skills and attitudes in others?
G. How can I become involved in the social systems that exist to
   • develop positive skills and attitudes in citizens?
   • help those with AODA-related problems?
H. How can I become an advocate for AODA programs in my school and community?

Student Outcomes

Rather than provide educators with an extensive list of K-12 classroom objectives, this guide focuses on desired student **outcomes** listed by content area and grade-level group. Curricula that emphasize classroom objectives sometimes lose sight of the long-term curriculum goals or lower the level of student performance and evaluation to rote factual learning. As a result they have minimal impact on student attitudes and behaviors.

Focusing on student outcomes, the teacher (with support of fellow teachers and the AODA coordinator) decides what tasks or classroom objectives are appropriate for students to authentically reach specific outcomes.

By focusing on student outcomes, the teacher (with support from fellow teachers and the AODA coordinator) decides what tasks or classroom objectives are appropriate for students to authentically reach specific outcomes. In addition, the classroom teacher determines the standards of achievement for each outcome.

To do this well, the teacher must reflect on the relevance of each outcome statement and assess how he or she has come to understand it or apply it in his or her own life. For example, an outcome for students to achieve by the end of first grade is to differentiate among foods, medicines, drugs, and poisons. Before the teacher can determine what level of understanding is desirable for a first-grader, the teacher reflects on how he or she constructed meanings for the terms foods, medicines, drugs, and poisons; how children today may construct their meanings for these substances; and what value students may see in exploring these meanings versus memorizing definitions for a test or to please the teacher. While this type of curriculum development is challenging for curriculum developers, it results in more authentic learning for students—learning that stretches beyond information-based techniques of AODA prevention.

The student outcomes in this chapter are arranged according to grade-level groups. There are no outcomes specific to one grade; rather, the outcomes are designed to be met by the end of the last school year in that group. The grade-level divisions are: kindergarten through grade 1, grades 2 through 4, grades 5 through 8, and grades 9 through 12. Some outcomes may be met earlier in the grade-level group, and others will be met later. Again, it is the district's option to sequence and identify content in a way that is consistent with local resources and with district philosophy and policy.

Figure 3 provides an overview of all K-12 student outcomes for each content area. It is important to observe that the outcomes have a cumulative effect; once an idea is introduced it is repeated and developed in following grades. This view of curriculum emphasizes that people continually reconstruct their understanding and attitudes as well as sharpen their skills. Likewise, content areas all relate to one another. For example, influences are examined as they relate to rules, effects, and safety. Even though outcomes are listed under one content area, they relate to other content areas, but perhaps to a lesser degree.

The emphasis on outcomes and content areas may prompt curriculum planners to ask, "How are the student competencies related to outcomes?" These competencies—AODA information, personal, interpersonal, and social system—are infused throughout all content areas. The teacher does not

directly teach a competency; rather, the student develops all four competencies as he or she works toward mastering outcomes. The competencies are subtle vehicles for students to achieve the overtly stated outcomes.

What follows are the student outcomes and an explanation of their relevance for each of the four grade-level groups.

Competencies—AODA information, personal, interpersonal, and social system—are infused throughout all content areas. The teacher does not directly teach a competency; rather, the student develops all four competencies as he or she works toward mastering outcomes.

Kindergarten through Grade 1 Overview

The curriculum designed for students this age acknowledges the understanding of alcohol and other drugs (including medicines and poisons) that the student already has constructed. Children entering kindergarten have had a wide variety of experiences related to these substances. Attitudes and limits are being established (either directly or indirectly) by friends, family, and school and community members. The curriculum, if it is to be effective, cannot be based on the assumption that the child is a "blank slate" upon which the absolute truth about alcohol and other drugs will be written.

While clearly there are some fundamental ideas, such as the use of alcohol and other drugs is wrong and harmful, the ease with which the child will be able to assimilate these ideas into his or her reality will vary. The ideas contained in the curriculum may clearly contradict what some children see outside the classroom and create confusion or questions. To help this assimilation process, the relevancy of the curriculum for the student is explored in a manner appropriate for children this age. It is important that the child becomes aware of his or her sources of information; the process he or she uses to accept or reject information and current facts about medicines, poisons, and alcohol and other drugs; the need for limits concerning these substances; and the development of self-reflective abilities.

Kindergarten Through Grade 1 Student Outcomes

Influences on AODA Conceptualization

A. What have I learned, in and out of school, about alcohol and other drug abuse (AODA)?
B. Where and how has this AODA information been learned?
C. What are my words and actions teaching others about alcohol and other drugs?

The curriculum, if it is to be effective, cannot be based on the assumption that the child is a "blank slate" upon which the absolute truth about alcohol and other drugs will be written.

Effects of Alcohol and Other Drug Abuse

A. What are the similarities and differences among foods, medicines, drugs, and poisons based on their effects and the conditions in which they are used?
B. How do I decide which foods, medicines, drugs, and poisons are good or bad for me?
C. What are examples of the effects of foods, medicines, drugs, and poisons that can be immediately seen or happen more slowly over time (visible and invisible effects)?

Rules about Alcohol and Other Drugs

A. What rules exist for me regarding foods, medicines, drugs, and poisons?
B. How did I learn these rules? Do I follow them?
C. Do all families and individuals have the same rules about foods, medicines, drugs, and poisons? Explain.
D. Why do rules exist about foods, medicines, drugs, and poisons?

Keeping Safe from Alcohol and Other Drug Abuse

A. What feelings do I have that I label as good, bad, or mixed?
B. Who can help me when I'm feeling bad or confused?
C. What do I know and what do I do to keep myself safe and healthy?

Grades 2 Through 4 Overview

Students in grades 2 through 4 continue to compare what is learned in school with what is learned out of school. Increasingly at this age, the influences of peers and society become stronger and may conflict with ideals being taught by parents or teachers. Children this age are more aware and less forgiving of contradictions between adult words and actions concerning alcohol and other drugs.

Parents and teachers of children in grades 2 through 4 begin to see a subtle shift in allegiance from significant adults to the peer group. While not always as pronounced as the peer-group allegiance in middle, junior high, or senior high school, it is an important time of changing influences, and a rethinking of previously held beliefs and attitudes. It is important to note that in a recent study of Wisconsin youths, 21 percent of the sixth-grade class reported that their first use of cigarettes occurred in grade 5 or earlier and 29 percent reported using alcohol in grade 5 or earlier. (Department of Public Instruction, Wisconsin Department of Health and Social Services, 1991) Clearly, waiting until fifth or sixth grade to examine influences on attitudes and behaviors concerning these substances is too late for nearly one-third of Wisconsin students. In recognition of this, the student outcomes ask children to reflect on these changes in influence and to compare current attitudes with those of previous grades. This important aspect of student outcomes continues throughout all remaining grades.

In a recent study of Wisconsin youths, 21 percent of the sixth-grade class reported that their first use of cigarettes occurred in grade 5 or earlier and 29 percent reported using alcohol in grade 5 or earlier.

At this grade level, student outcomes become more complex, and explore

- how students' understanding of AODA issues changes and becomes more complex as a result of personal and interpersonal experiences.
- how alcohol and other drugs affect the mind as well as the body.
- the contradiction between knowing AODA risks and choosing to use alcohol or other drugs.
- rules related to alcohol and other drugs and how they vary.
- the contradiction between knowing rules related to alcohol and other drugs and choosing to ignore them.
- the processes students use to make decisions in their own and others' best interests.

Grades 2 Through 4 Student Outcomes

Influences on AODA Conceptualization

A. What new ideas am I learning about alcohol and other drug abuse?
B. Where and how has this new AODA information been learned?
C. What beliefs about alcohol and other drug abuse do I hold that might be biased or stereotyped?
D. How do my beliefs about AODA and my sources of AODA information compare to those I held in earlier grades?
E. What are my words and actions teaching others about alcohol and other drugs?
F. How do my words and actions concerning alcohol and other drug abuse compare with what others are teaching me?
G. What is peer pressure? What distinguishes good pressure from bad pressure?
H. Can peer pressure be both good and bad at the same time? Explain.
I. How do I use peer pressure to my advantage?
J. How does my use of peer pressure affect others?
K. How much of what I learned about alcohol and other drugs in earlier grades do I use in my everyday life?

Effects of Alcohol and Other Drug Abuse

A. How do alcohol and other drugs affect the mind and body?
B. How do I distinguish between positive, negative, or mixed effects of alcohol and other drugs?
C. When might the bad effects of alcohol and other drugs seem good to a person?
D. What are alternative ways to feel good without using alcohol and other drugs?

Rules About Alcohol and Other Drugs

A. What are similarities and differences in the rules set by me, my family, my school, and my community regarding alcohol and other drugs?
B. Do I keep these rules in all circumstances? Explain.
C. Why are some rules about alcohol and other drugs broken?
D. What are consequences of breaking rules related to alcohol and other drugs?
E. Is it ever right to break a rule? Why do rules exist if people can and do break them?
F. Why can I hold healthy beliefs and accurate knowledge about AODA and yet fail to follow rules?

Keeping Safe from Alcohol and Other Drug Abuse

A. What is a risk?
B. What criteria do I use to label the risks I take as positive or negative?
C. How do I keep safe and healthy and still take risks?
D. What personal skills do I have or need to develop to stay away from unsafe risks?

E. What are my personal traits that make it difficult for me to stay safe and healthy?
F. What people, programs, and organizations in my school and community help people who have AODA-related problems?

Grades 5 Through 8 Overview

The outcomes for students in grades 5 through 8 increase in complexity as they build on the foundation of knowledge and skills previously established. The number of outcomes in this group is large because of the breadth of grades included in this range and the acknowledged importance of prevention for these students.

The outcomes for students in grades 5 through 8 increase in complexity as they build on the foundation of knowledge and skills previously established.

New ideas introduced include

- the effects alcohol and other drugs have on relationships, society, and individual perspective;
- self-reflection on the student's ability to follow rules related to alcohol and other drugs; and
- examining personal and societal attitudes and behaviors for inconsistencies or contradictions.

Concepts that are enhanced include self-reflection about changes in the student's beliefs and attitudes toward alcohol and other drugs and the student's ability to promote his or her own health and safety. Numerous outcomes also reinforce the idea of the student as a role model and advocate for AODA prevention and intervention.

Grades 5 Through 8 Student Outcomes

Influences on AODA Conceptualization

A. What are my beliefs and attitudes about alcohol and other drugs?
B. What are my most valued sources of AODA information and influence?
C. Are my beliefs, including stereotypes and biases, enabling me and others to deny or see the truth about AODA?
D. How do my beliefs, including stereotypes and biases, influence my behavior regarding alcohol and other drugs?
E. For whom am I a valued source of AODA information and influence?
F. What are my least valued sources of AODA information and influence?
G. What is my criteria for deciding to believe or reject AODA information?
H. How much has what I already have learned about alcohol and other drugs influenced my behavior and attitudes regarding AODA?

Effects of Alcohol and Other Drug Abuse

A. How has other people's use of alcohol and other drugs affected me?
B. What new AODA effects am I aware of now that I am older?
C. How are effects of alcohol and other drugs on mind and body related to individual differences (such as age, weight, or gender)?
D. How does alcohol and other drug abuse affect family and peer relationships?
E. What impact has AODA had on our school and community?
F. What effect has AODA had on the activities my friends and I do together?
G. What effects of alcohol and other drugs signal misuse, abuse, or dependency?

Rules about Alcohol and Other Drugs

A. What criteria do I use to label rules (including AODA rules) as fair or unfair?
B. How do labels influence my ability to follow rules?
C. How do consequences for breaking specific AODA rules change as people get older?
D. How might alcohol and other drugs affect my ability to follow the rules my family, friends, school, and community have set for me?
E. How might alcohol and other drugs affect my ability to follow the rules I have set for myself?
F. What changes are occurring in the rules that my peers, family, school, and community set for me concerning alcohol and other drugs?
G. How do my rules concerning alcohol and other drugs compare with rules for these substances in other cultures and communities?
H. How do my internal rules differ regarding tobacco, alcohol, and illegal drugs?
I. What are some spoken and unspoken rules regarding tobacco, alcohol, and other drugs?
J. Are all rules about alcohol and other drugs consistent among situations, people, and groups? Explain.

Students in grades 9 through 12 are better able to think abstractly about alcohol and other drug abuse and related issues. However, many AODA curriculum packages continue to teach very low-level thinking skills on repetitious topics.

Keeping Safe from Alcohol and Other Drug Abuse

A. What skills and attitudes am I practicing to keep myself safe and help others keep safe from AODA?
B. What myths about AODA risks are promoted culturally? By my peers? By me?
C. What groups, individuals, or organizations can help me assess my risk or others' risks for AODA?
D. What is the danger in denying personal risks for AODA?
E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?
F. How do alcohol and other drugs affect my ability to keep myself and others safe and healthy?
G. What responsibility to others do I have to make safe choices about alcohol and other drugs?
H. What social systems exist to
   - develop positive skills and attitudes in citizens?
   - help those with AODA-related problems?
   - intervene with problems?

Grades 9 Through 12 Overview

Students in grades 9 through 12 are better able to think abstractly about alcohol and other drug abuse and related issues. However, many AODA curriculum packages continue to teach very low-level thinking skills on repetitious topics. It is little wonder that some senior high school students ignore AODA instruction or complain that they are bored with "drug talk."

Therefore, the following student outcomes are designed to emphasize critical analysis of current AODA issues relevant to students of this age, including

- analyzing the role of alcohol and other drugs in American society and its influence on citizens.
- examining the degree to which the use of alcohol and other drugs defines personal identity in oneself and others.
- examining personal understanding of major AODA issues.
- analyzing consequences of AODA and related problems for the student, his or her family, the community, and society.
- evaluating personal strengths, weaknesses, consistencies, and inconsistencies in relation to AODA.
- developing a proactive orientation to social issues such as AODA prevention.

These outcomes, like all other student outcomes in this model, are much more than students passively reciting information. They require students to do something with what they know. In whatever way possible, students are asked to apply classroom learning to their own life—a goal that many teachers may or may not include as a part of student assessment.

Grades 9 Through 12 Student Outcomes

Influences on AODA Conceptualization

A. What current economic, cultural, and social factors promote alcohol and other drug abuse?
B. To what extent have tobacco, alcohol, and other drugs permeated my culture and community?
C. How has this permeation of tobacco, alcohol, and other drugs influenced the way I demonstrate that I am becoming more adult?
D. What concept of adulthood are others demonstrating for me?
E. What concept of adulthood am I demonstrating for others?
F. How does my use or nonuse of alcohol and other drugs enhance or detract from my sense of self-worth, sexuality, and gender identity?
G. How do my family's and friends' views and practices regarding alcohol and other drugs affect my behavior?
H. What stages has my thinking gone through since kindergarten regarding alcohol and other drugs?

Effects of Alcohol and Other Drug Abuse

A. How do parents' choices regarding alcohol and other drugs affect their children?
B. How does a person's alcohol and other drug use affect others? Misuse? Abuse? Nonuse?
C. How do alcohol and other drug nonuse, use, misuse, and abuse affect a person's style of thinking or ability to think?
D. How are these effects on thinking addressed in treatment and recovery?
E. How do effects of alcohol and other drugs on the mind and body change if drugs are combined with one another or with other substances?
F. What effect has AODA had on our city, state, nation, and world?

Rules about Alcohol and Other Drugs

A. What process do I now use to set rules for myself concerning alcohol and other drugs?
B. How does this process compare with the way I established rules for myself when I was younger?
C. Do my rules about alcohol and other drugs allow me to make positive choices for myself?
D. Do my rules about alcohol and other drugs affect others positively, negatively, or in a mixed way?
E. What are my internalized rules for alcohol and other drugs?
F. How do these rules compare with previous rules and with external rules?
G. What is the basis of the school's, community's, and society's thinking that generated current laws and policies related to alcohol and other drugs?
H. How can a person differentiate norms from rules and laws related to alcohol and other drugs?
I. What are the implications for myself and others if the majority of people in society choose to ignore rules and laws related to alcohol and other drugs?
J. What are the legal consequences for me of ignoring rules and laws related to alcohol and other drugs?
K. What are justifiable criteria for judging the fairness of rules, laws, policies, and norms related to alcohol and other drugs?
L. If rules, laws, policies, and norms related to alcohol and other drugs are proven unfair, what is the appropriate response for individuals and society?

Keeping Safe from Alcohol and Other Drug Abuse

A. What skills and attitudes have I developed that help keep me and others safe and healthy in relation to AODA?
B. How consistently do I apply these skills and attitudes in AODA-related situations?
C. What kind of support do I need to help me consistently use these skills and attitudes?
D. How have my skills and attitudes improved as I've gotten older?
E. How do these skills and attitudes affect my risk of
   - becoming infected with the human immunodeficiency virus (HIV) or other sexually transmitted diseases?
   - having a child with fetal alcohol syndrome?
   - becoming a victim or perpetrator of sexual violence?
   - being involved in an unplanned pregnancy?
   - dropping out of school?
   - breaking the law?

F. How can I foster positive skills and attitudes in others?
G. How can I become involved in the social systems that exist to
   - develop positive skills and attitudes in citizens?
   - help those with AODA-related problems?

H. How can I become an advocate for AODA programs in my school and community?

Summary

The principles, content, and outcomes presented in this chapter are applicable to all AODA education programs. Whether using purchased or locally developed materials, the student outcomes are achievable through planning and forethought by teachers. Careful consideration of instructional strategies and lesson design allows teachers to take what currently exists and refocus it in a new and perhaps more meaningful way. Subsequent chapters provide some suggestions for accomplishing this task within content areas.

References

Wisconsin Department of Public Instruction and Wisconsin Department of Health and Social Services. *The Wisconsin Study: Alcohol and Other Drug Abuse*. DPI, DHSS, 1991.

Sample Lessons

Sample Lessons for Effective Teaching Toward Student Outcomes
Common Elements of Sample Lessons

K-1 — Feelings
K-1 — Identifying Helpful People
Grades 2-4 — AODA Terms: Drugs and Medicines
Grades 2-4 — Risking Negative Effects
Grades 2-4 — Consequences of Decisions
Grades 5-8 — Decision-Making Case Study
Grades 5-8 — Categories of Decisions
Grades 5-8 — Effects of Categorization on the Decision-Making Process
Grades 9-12 — Laws Related to Alcohol and Other Drugs
Grades 9-12 — Practicing AODA Prevention Behaviors and Attitudes

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Sample Lessons for Effective Teaching Toward Student Outcomes

This chapter provides examples of classroom lessons that have been remodeled to more effectively teach toward the student outcomes of the Wisconsin AODA Curriculum Model and to be more consistent with the model's underlying assumptions. These examples are intended to more completely illustrate an alternative view of teaching as it applies to AODA instruction. These lessons are not the only way to present the material, rather they provide an option that educators may wish to consider. The specific topics (such as feelings, decision making) were chosen because they tend to be topics frequently included in AODA instruction. Therefore, the sample lessons should not be construed as the only lessons needed to adequately teach the topic.

Common Elements of Sample Lessons

The sample lessons in this chapter are presented in a consistent format. What follows is an explanation of the major headings to clarify the rationale for and delivery of the sample lessons.

Standard Approach

The standard approach summarizes the way the lesson is presented when based on the assumptions of other curriculum models. It includes instructional methods that do not require students to demonstrate assimilation of new learning. These standard approaches should not be labeled as poor lessons, they simply do not help students achieve the outcomes of the Wisconsin Model. They are based on alternative assumptions.

Remodeled Approach

Assumptions

To check for consistency with the Wisconsin Model, curriculum developers identify the underlying assumptions that motivate them to teach a lesson in a particular way. These assumptions represent the teacher's basic beliefs about influences, effects, rules, and safety as related to AODA and the nature and purpose of learning when the goal is for students to be able to use what they are learning—now and in the future. Each of the assumptions in the remodeled lesson is related to one or more Wisconsin Model assumptions listed in Chapter 1 and is reflected in the lesson's content. By identifying underlying assumptions, people not involved in developing the lesson can more clearly understand the teacher's philosophy and check it for consistency with lesson content and district philosophy. Identifying assumptions is an important step to help teachers clarify what they feel is important for students to know. Using the assumptions of others or skipping this step decreases the authenticity of the lesson for the teacher and ultimately for the students.

Objectives

Objectives are specific tasks that the lesson is designed to help students accomplish and are found in all well-organized lessons. If the teacher understands the long-term goals and outcomes, he or she is better able to develop student objectives that relate specifically to the lesson, are measurable, and lead to accomplishment of curriculum goals and outcomes. The objectives drive classroom activities instead of vice versa.

Related Student Outcomes

Each remodeled lesson specifies the student outcomes (Chapter 2) that the lesson is helping students achieve. As shown in the samples provided, one lesson often relates to many outcomes. However, each lesson is only one of several lessons that help a student achieve the outcomes.

Background and Planning Questions for the Teacher

As with the assumptions, this element of the remodeled lesson helps the teacher reflect about what should be taught and the best methods to use when teaching. Without this step, teachers may unconsciously adopt or reject existing lessons without considering why they have done so. Many of the questions ask the teacher to put himself or herself in the role of the student. In this way, the teacher recalls how, at the students' age, he or she learned similar information. In reflecting on significant learning experiences about AODA, few people recall multiple choice tests, memorized formulas, or quotations from textbooks. Instead, many recall that much of their real learning came from conversations and interactions with other people of all ages in a variety of situations and that the learning process is still taking place. Such recollections, if utilized during lesson development, help the teacher structure more effective learning activities for students.

In reflecting on significant learning experiences about AODA, few people recall multiple choice tests, memorized formulas, or quotations from textbooks.

Classroom Activities

The remainder of the lesson contains various classroom activities and strategies such as small-group work, group discussion, and homework assignments. Appendixes A through E contain some suggestions for conducting these activities. The lessons are designed to improve the critical-thinking abilities of students in relation to AODA. Students are actively engaged in constructing information rather than passively receiving it from teachers. Thus, few activities are based on lecture, text assignments, or memorization.

Consistent with the assumption that students come to class with existing knowledge about AODA concepts, many lessons give students an opportunity to identify their prior knowledge. These exercises take a variety of forms depending on the age and ability of the student. The samples provided often rely on written recollection in a student journal or portfolio. While written work is not the only option, the student finishes the exercise with an understanding and awareness of the knowledge he or she brought to the lesson. Other methods include, but are not limited to, video or audio

tapes, plays, or art projects. This clarification of existing knowledge is to be as complete as the student is able to provide. The amount of time a student needs to do this will vary among students, from day to day, and among topics. Some lessons may require an entire class period to clarify prior knowledge. Where this is not possible, students are encouraged to continue the exercise at home, in days to come, or at any time they recall additional ideas.

Documentation of existing knowledge acknowledges the student's prior experience and provides both the student and teacher with a way to measure new understanding at the lesson's or school year's completion. Far from being a "pre-test" it is a collection of a student's thoughts, feelings, attitudes, and beliefs on the subject he or she will be learning more about.

Successful completion of the portfolio provides students and teachers with documented evidence that assimilation of AODA lessons is taking place.

Portfolio Activity

Each sample lesson concludes with a portfolio activity. A portfolio is a collection of each student's work in AODA education. Ideally, it is initiated with the first lesson in kindergarten and is supplemented during subsequent lessons through grade 12. In some districts it is not possible to continue portfolio activities across grade levels due to the lack of teacher or administrator understanding and support. However, some value still can be gleaned when even one teacher helps students concentrate on portfolio activities for one school year or a minimum of one semester during high school. For many districts, having portfolio activities carry across subject areas or grade levels may be a long-term goal. Successful completion of the portfolio provides students and teachers with documented evidence that assimilation of AODA lessons is taking place. It is in the portfolio that the student demonstrates what he or she has attempted to incorporate into daily life. The portfolio may be arranged by content area as well as by grade.

The student documents existing knowledge on a topic before a lesson or set of lessons. This may be written, videotaped, audiotaped, or documented in some other tangible form.

At the conclusion of lessons, the student records new ideas learned in the classroom activities. They may be lists, statements, essays, and so forth. Form is secondary to comprehensiveness of content. This record of new information documents what new ideas the student knows at this time, but it is not necessarily an indication of learning.

At some point in curriculum development, teachers clarify for themselves what conceptualizations, attitudes, and skills are desirable for students to practice incorporating in daily life. These may include, but are not limited to, refusal skills, reasoned decision making, reducing inconsistencies between beliefs and actions, recognizing myths, and becoming a positive influence for others. Lessons that deal with these skills include a portfolio activity that asks the student to identify goals he or she hopes to meet to practice using these skills in real life. These goals are written in the portfolio and may be shared with classmates, teachers, and family members. Throughout the school year the student, his or her family, and teachers generate examples that show the student is attempting to incorporate the skill in daily life. It is unrealistic to expect a student to have a large number of goals and a large number of examples. Teacher expectations and

directives emphasize that making small progress on a few important skills is more valuable than inventing many examples related to every skill taught. The decision of the specific skill(s) to practice is left up to the student.

Students document achievement of the outcomes listed in Chapter 2 in their portfolios. There are many ways this may be structured, but by the end of a grade-level group (K-1, 2-4, 5-8, 9-12) each outcome has a corresponding written, or otherwise constructed, answer. Students often utilize portfolio activities from previous lessons to formulate their answers to outcome questions. Again, the teacher must clearly understand what he or she expects students will incorporate in their answers. In many cases, the students' answers closely mirror the teacher's underlying assumptions that originally influenced lesson development.

Portfolio activities are appropriate for lessons, at the end of major units, or as a blend of these two choices. Whatever the choice, the teacher must have a rationale for the portfolio activity. Anytime classroom work carries over into a student's personal life, numerous questions arise.

Privacy

A student's recorded portfolio work may include personal situations. Therefore, it is important that students are told in advance that the portfolio information will be read by the teacher, other teachers, or parents. With advance warning, students then may choose to include only certain types of information and delete others. The skills described previously can be used by students in a wide variety of situations. Therefore, most students should be able to find nonthreatening examples of situations in which they have applied the skills they are attempting to assimilate. The purpose of these examples is to provide students with a concrete task that when accomplished promotes self-reflection and a more continuous awareness of the skills the lessons are designed to develop.

Authenticity

When students are asked to document examples of their ability to utilize skills, some teachers are concerned that students fabricate examples to get a better grade. Unfortunately, education often has stressed product over process, thereby overemphasizing grades and competition. Naturally, students become concerned about what they must do to get an A rather than valuing the process of learning new skills and information. To avoid this, teachers who ask students to keep portfolios must consistently emphasize the process they are asking students to use rather than the number of examples the student accumulates. Saying the process is most important but grading on quantity gives students mixed messages. One way of handling this dilemma is to grade portfolios on a complete/incomplete basis.

Tell me . . .
I forget.

Show me . . .
I remember.

Involve me . . .
I understand.

—Ancient Chinese Proverb

Evaluation

The portfolio assignments are one avenue available to the teacher for student assessment, requiring that he or she determines what constitutes acceptable work. To do this, the teacher considers the curriculum goals and the role the portfolio assignments have in helping students achieve the

goals. Portfolio assignments document the student's ability to assimilate the AODA skills and information taught in the classroom. For some reason, educators often teach content and expect students to automatically transfer it into all real-life AODA situations.

Evaluation then is considerate of the human learning process. Acquiring and using new skills occurs piecemeal in most people. Therefore, evaluation must recognize that small increments of change are large accomplishments. In some cases, a student's behavior may not change but the student is more aware that he or she is not using the skills the teacher has presented. For some students, the ability to see such a contradiction is a major achievement. Evaluation of portfolio work acknowledges the complexity of learning.

Evaluation then is considerate of the human learning process. Acquiring and using new skills occurs piecemeal in most people. Therefore, evaluation must recognize that small increments of change are large accomplishments.

Some suggestions for evaluating portfolio work include the following:

- Do not assign letter grades to portfolio work. Instead provide written and verbal feedback on the quality of the work and the evidence it includes that demonstrates the student is indeed attempting to modify his or her behavior. Letter grades sometimes promote less authentic work and a more competitive learning environment.
- Communicate clear expectations for yourself and the students regarding the purpose of the students' portfolio work.
- Recognize that less is more when learning new skills and information. Do not expect students to generate a large number of examples. Appreciate one or two good examples for each assignment.
- Discuss portfolio work with students and when appropriate with parents. Talking with students about portfolio work helps clarify for both the teacher and student the reasoning the student used to include specific examples. Some students communicate more effectively by talking about their examples rather than by writing them. Important questions to discuss with students about their portfolio work include
  - — what conclusion can you make from your examples?
  - — what skills seem to be easier for you to use?
  - — what makes it hard for you to use this skill?
  - — what might you be able to do in future situations to make it easier to use some skills?
  - — what has this portfolio assignment taught you about AODA? How did you learn this?

Appendixes F and G provide some background information to help determine the quality and content of work students may exhibit in their portfolio and in their classroom activities.

Feelings

Standard Approach

Students model different feelings using facial expressions and gestures. Feelings to model include happy, sad, afraid, ashamed, angry, and worried. Using a worksheet of faces illustrating various feelings, students choose a facial expression and state a time they felt that way. The teacher tells a story about a feeling and the students find the appropriate face on the worksheet. Children draw a picture of how they are feeling that day, label it, and tape it to their desks.

Remodeled Approach

Assumptions

1. At a young age, children experience various feelings and develop a pattern of response.
2. Children get messages from feelings.
3. Children's experiences with and responses to feelings are individually unique.
4. Children's feelings and responses are influenced through interactions with family, peers, culture, and society.
5. People are sometimes confused by their feelings, and their responses to feelings may or may not promote safety, health, and well-being.

Objectives

The student will be able to

- identify that feelings are uniquely experienced among different people.
- describe how he or she experiences specific feelings.
- differentiate between feelings he or she experiences as signals of safe situations or feelings he or she experiences as unsafe situations.
- compare and contrast various ways of responding to feelings.
- document over time the feelings he or she experiences and his or her responses to those feelings.

Related Student Outcomes

Keeping Safe from Alcohol and Other Drug Abuse

A. What feelings do I have that I label as good, bad, or mixed?
C. What do I know and what do I do to keep myself safe and healthy?

Background and Planning Questions for the Teacher

1. What kinds of feelings send me a message that my safety is threatened or that I am in a dangerous situation?
2. What kinds of feelings lead me to do dangerous or unhealthy things?

3. Am I very good at interpreting messages from feelings or do I ever incorrectly interpret a feeling? Do I perceive an unintended message? Do I do unsafe things? Explain.
4. How does my response to and experience with specific feelings (anger, happiness, fear, loneliness, worried, sad, excluded, and so forth) compare to the way I responded to and experienced these feelings as a child?
5. What and who significantly influenced the way I experienced and responded to feelings as a child?
6. What value does self-reflection about feelings have for me? For my students?
7. What may be significant influences on my students' experiences with and responses to the feelings they have?

Classroom Activities

The teacher elicits the students' prior knowledge about feelings, their messages, and students' responses. What feelings and messages promote safety, health, and well-being? What feelings lead to dangerous situations, sickness, or poor health?

Students brainstorm names of feelings that people experience. After the brainstorming session, students draw a picture of a safe feeling they've experienced recently and an unsafe feeling they've experienced recently.

Large-Group Discussion

Students volunteer to explain the pictures they drew of both feelings and give an example of when they felt that way. The teacher encourages the students to name the feelings they drew in their pictures.

Students then discuss the following questions.

- Do all people feel unsafe about the same thing?
- Do all people feel safe about the same thing?
- Why might it be important to know which feelings are comfortable (safe) and which are uncomfortable (unsafe) for us?
- How does your body let you know if you are feeling safe? Unsafe?
- Is it possible to have safe and unsafe feelings at the same time? What are some examples?
- What kinds of feelings lead you to do dangerous things, such as crossing the street when cars are approaching? What are similar situations and feelings? What might be some consequences of not sensing danger in unsafe situations?

Individual Activity

Students draw a second set of pictures illustrating something they did because they had safe or unsafe feelings (such as cry, hit, talk to somebody, smile, hug, laugh, yell).

Large-Group Discussion

Students volunteer to explain the pictures they drew of their responses to safe and unsafe feelings. The teacher encourages the students to think about the consequences of responding as they did.

Students discuss the following questions:

- Do all people respond in the same way to these feelings? Why or why not?
- Are there ways of responding that are better than other ways? What makes them better?
- Are the ways you respond to your feelings always helpful? Explain.
- What can people do to improve the way they respond to certain feelings?
- What might happen if people never thought about the way they behave when they have certain feelings?

Portfolio Activity

For the remainder of the school year, students continue to draw pictures of feelings that give the message of danger. With the help of other students and the teacher, if necessary, each student labels his or her pictures with the names of the feelings they represent. The student keeps a copy of each of his or her pictures in the portfolio. The original picture is used to create a mural entitled: "Feelings That Signal Danger." Likewise, students continue to draw pictures of their reactions to these feelings. Again, a copy of each picture is placed in the student's portfolio, and the original may be used to create a mural. The teacher may want to set aside some time a week to discuss the students' pictures and experiences. The purpose of these discussion sessions is to continue the self-reflection and learning that was initiated in the original lesson. In order for this to happen, the teacher creates an atmosphere that is psychologically safe for students to share their feelings, the messages, and their responses that may not be safe and healthy responses. While it is not the teacher's role to judge the appropriateness of students' feelings, it is important that the teacher helps students decide if their responses resulted in safety, health, and well-being. Examples generated in this activity will be especially important in future lessons to help students examine their changing concept of the word dangerous, particularly as it applies to alcohol and other drugs.

Note to the teacher: It will take a long time for students to trust a teacher and admit that "how they were feeling" (afraid, alone, hurt, worried, mad, and so forth) led them to believe their safety was threatened or led them to do dangerous things. The teacher must maintain the role of a patient observer to help students reflect on feelings that lead them to responses related to alcohol and other drugs (what messages do they read and fail to read as safe and healthy feelings and responses). Each student will differ due to individual life situations. The teacher can work with students in developing ways students can reward themselves for learning a safe, healthy method to respond to a feeling that they normally respond to in a dangerous way.

Identifying Helpful People

Standard Approach

Students discuss adults they can go to for help when afraid, sick, or lonely. Each child traces his or her hand on construction paper and labels each finger with the name and telephone number of a "helper." These helping hands are then laminated for children to take home.

Remodeled Approach

Assumptions

1. Not all children place their trust in the same adults.
2. Children establish their own criteria for people they consider helpful.
3. For the safety of children, adults must help children establish criteria that is valid.
4. People continually redefine their concept of "helpful" as it relates to the people with whom they interact.

Objectives

The student will be able to

- describe the meaning he or she holds for identifying someone as helpful in unsafe situations.
- distinguish between helpful and unhelpful behaviors for safety.
- identify helpful adults he or she can access when his or her safety is threatened.

Related Student Outcomes

Keeping Safe from Alcohol and Other Drug Abuse

B. Who can help me when I'm feeling bad or confused?

Background and Planning Questions for the Teacher

1. When I was the age of my students, how did I distinguish between helpful and unhelpful adults?
2. At what age could I accurately judge a situation as risky and unsafe?
3. How have my criteria for labeling people as helpful changed over time?
4. What value might my students see in identifying helpful people to access if needed in risky or unsafe situations?
5. What criteria for identifying helpful people are essential to ensure the safety of young children?
6. What personal qualities are important to have in order to help someone in a situation with a high degree of risk or threat to safety?

Classroom Activities

Note to the teacher: As students grow and begin using alcohol and other drugs, they differ from adults in viewing the situation as dangerous. Beginning in kindergarten, the student's portfolio needs to contain information on the student's views of what is dangerous and what is not. Students see that as they get older they differ from their parents, teachers, and other adults in terms of their assessment of a situation as dangerous. At the same time, students must develop an understanding that even people of the same age can differ in what they consider dangerous behavior and who they consider helpful people in dangerous situations. Teachers (K-12) must understand that AODA prevention programs will succeed when students view alcohol and other drugs as dangerous. The basis for this understanding is developed early and in many different ways that can be collected in the portfolio.

The teacher selects a children's story in which there is a high-risk, a threatening, or an unsafe situation for the main character. As the story is read, the teacher highlights dangerous behaviors and safe behaviors. The dangerous and safe behaviors could be associated with the character in trouble or with companions who are the same age, younger, and older. While reading the story, the teacher asks questions about what the character in danger is feeling—confused, afraid, fearful, or nothing (oblivious to the danger and feeling happy).

After reading the story, the students discuss in large or small groups the following ideas in order to elicit prior knowledge:

- What are dangerous or unsafe situations for babies, preschoolers, kindergartners, first graders?
- Why do we agree on some situations as dangerous and disagree on others?

Students tell their own stories or act out a story of a dangerous situation, helpful behaviors, helpful people, and related emotions (such as confusion or fear). The teacher can question the students to see if they always thought of the situations as dangerous (as a preschooler, for example) or if their view of dangerous changed as they got older.

The teacher reads aloud to the class stories that include examples of helpful behavior and examples of unhelpful behavior (see suggested resources at the end of the lesson). In discussing the stories, the teacher asks the students to give specific examples from each story of helpful behaviors and specific examples of unhelpful behaviors. These may be listed on the chalkboard. The teacher asks the students to explain their reasons for classifying these behaviors as helpful or unhelpful.

After generating these examples, the teacher asks students to think of words or phrases that describe helpful people (such as caring, wise, honest).

In groups of two to four, students draw a picture of one of the previously generated characteristics. Each group shares its drawing with the rest of the class.

Students then discuss the following questions.

- Does a person have to be all of these things (caring, wise, honest, and so forth) to be considered helpful? Explain.
- Can people of any age be helpful? Explain.
- To be considered helpful in a high-risk, unsafe situation, does the person's age or expertise make a difference?
- What are some low-risk, safe situations in which you may need help? Does age or expertise make a difference in who would be able to help you?
- In what kinds of situations might an older person or adult be more helpful to you than someone your own age?
- Give some examples of adults who have been helpful to you, and explain how they were helpful.
- Are the adults that you consider helpful the same adults that your classmates named?
- What are some groups of people who often are helpful (such as police officers, parents, teachers, neighbors)?
- Why might we have differing opinions of who we consider helpful?

Portfolio Activity

During the school year, students identify and categorize people to turn to in high-risk, unsafe situations and in low-risk, safe situations. Students identify new unsafe situations and new helpful people they notice throughout the semester or school year.

Reflecting on these assumptions the students answer the following questions:

- What are helpful and unhelpful behaviors in high-risk, unsafe situations and in low-risk, safe situations.
- Do confusion, fear, and bad feelings happen only in high-risk, unsafe situations?
- Can you experience these emotions and still feel safe? Do you always need help when feeling bad, confused, and afraid or only when you feel these in high-risk situations?

Note to the teacher: This K-1 lesson is merely an example of an idea that could be introduced in many content areas throughout the K-12 program. History, for example, is filled with situations in which people did or did not assess the danger in decisions, activities, or situations and in which people did not perceive "helpful behavior or people" as helpful and ignored them. This safety principle surfaces in many curriculum areas each year. What some educators fail to do is clarify the relationships in these subject areas to development of students' understanding of the danger of AODA and the helpfulness of adults who help prevent problems related to alcohol and other drugs.

Suggested Children's Readings

What Should You Do When . . . ? A Book for Parents and Children to Read Together, by Amy Bahr
The Secret Worry, by Elissa P. Benedek
Poinsetta and the Firefighters, by Felicia Bond
Alfie Gives a Hand, by Shirley Hughes
Spiders in the Fruit Cellar, by Barbara Monnot Joosse
Margaret and Taylor, by Kevin Henkes
The Cat in the Hat, by Dr. Suess
Bartholomew the Bossy, by Marjorie Weinman Sharmat
Frizzy the Fearful, by Marjorie Weinman Sharmat
Where the Sidewalk Ends, by Shel Silverstein

AODA Terms: Drugs and Medicines

Standard Approach

In a presentation, the teacher gives definitions for the terms drugs, medicines, legal drugs, illegal drugs, drug use, and drug abuse. Students name examples of each of these terms and complete a worksheet using the new vocabulary words.

Remodeled Approach

Assumptions

1. People construct meanings for words that are not necessarily the same as the meanings held by others.
2. Meanings for the words drugs and medicines differ among people, cultures, and generations.
3. To communicate effectively about AODA issues, people must understand each others' common meanings for terms such as drugs and medicines.

Objectives

The student will be able to

- articulate the importance of understanding the meanings he or she holds for the terms drugs and medicines.
- appropriately adapt meanings of the terms drugs and medicines to a variety of contexts.
- assess the appropriateness of the meanings he or she holds for the words drugs and medicines.
- examine influences that have shaped his or her meanings for the words drugs and medicines.

Related Student Outcomes

Influences on AODA Conceptualization

A. What new ideas am I learning about alcohol and other drug abuse?
B. Where and how has this new AODA information been learned?
C. What beliefs about alcohol and other drug abuse do I hold that might be biased or stereotyped?
D. How do my beliefs about AODA and my sources of AODA information compare to those I held in earlier grades?

Rules About Alcohol and Other Drugs

A. What are similarities and differences in the rules set by me, my family, my school, and my community regarding alcohol and other drugs?

Background and Planning Questions for the Teacher

1. How are drugs and medicines similar and different?
2. While all medicines may be drugs, not all drugs are medicines. What are examples of other concepts that represent similar categories, such as all horses are animals, but not all animals are horses?
3. Why is it important for people to share common meanings for words like drugs? Does this same level of importance apply to sharing common meanings on terms like mother, friend, and so forth?
4. How do children construct meanings of words?
5. Do the meanings of words remain the same over time and in all situations?

Classroom Activities

Present the following questions to students before the lesson is introduced. Provide adequate time for students to formulate their responses. Encourage students to rethink these questions and add to their answers as the lesson progresses. The time needed for students to deal with these questions will vary from class to class. **Students will need their portfolio materials from previous grades to adequately address these questions.**

- Look back at the examples you recorded in previous grades of drugs and medicines. Do you still agree with those examples? Explain.
- If your views are different now, explain why. What do the terms drugs and medicines mean?
- How have you learned the meanings of the words drugs and medicines since you were very young?

Homework Assignment

Ask an adult, other than your teacher, to explain what the terms drugs and medicines mean.

Small-Group Activity

Divide the class into four to eight groups, and assign each group the task of developing lists of meanings for the words drugs and medicines from various perspectives. When groups have completed their work, provide all students with a copy of each group's final product.

Group 1A: Students obtain the meanings for drugs and medicines that were generated by their classmates in Question 2. List these on a handout labeled Current Personal Meanings.

Group 1B: Students collect meanings for the terms drugs and medicines that their classmates recorded in their portfolios from earlier grades. List these on a handout labeled Past Personal Meanings.

Group 2A: Students copy the definitions for the terms drugs and medicines from the dictionary. List these on a handout labeled Dictionary Definitions.

Group 2B: Students collect adult meanings obtained in homework assignments. List these on a handout labeled Current Adult Meanings.

Group 3A and Group 3B: Students research the meanings of the terms drugs and medicines for members of at least two ethnic groups such as Hmongs, American Indians, African Americans, Hispanic Americans, and European Americans. List these meanings on two separate handouts labeled with the name of the cultural group. **Note to the teacher:** This is a more difficult assignment. Be prepared to provide assistance and check for accuracy. Students need to realize that there are many viewpoints within the same ethnic group. This group also will share the sources of their information with the rest of the class. Students must be reminded that the information they present to the class should accurately represent the ethnic groups. The students should be able to defend their information as not being biased, stereotyped, or otherwise inaccurate.

Group 4A and Group 4B: Students research the meanings of the words drugs and medicines for eighteenth and nineteenth century European Americans. These are listed on a handout labeled Historical Definitions of Drugs and Medicines in American Culture.

Homework Assignment

Direct students to review these lists of meanings and share and discuss them with people outside of class.

Large-Group Discussion

Discuss the following questions:

- What do these lists tell you about the meanings people hold or have held for the terms drugs and medicines?
- How are the meanings different and similar?
- What might be some reasons why there are differences among these meanings?
- What might have influenced people to give different meanings for these words?
- What influences your meanings of the terms drugs and medicines?
- Why is it important for us to explore various meanings of the terms drugs and medicines?
- What might be the consequences of not examining the meanings of these terms?
- How can we make sure that the meanings we hold of the terms drugs and medicines are appropriate?
- How might the meanings one holds of these words influence one's attitudes and behaviors with these substances?

Portfolio Activity

Based on their experiences with this lesson, students describe their new understandings of the meanings that people hold for various words. Direct students to determine what they could do in real life to incorporate this new

understanding. (For example, ask people to clarify what they mean by certain words, try to see issues from another person's perspective, continue to explore the meanings that other people or groups hold for drugs or medicines.) In their portfolios, students write one or more goals for incorporating this understanding in their lives. Provide an opportunity for students to share their goal(s). Students have the right to keep their goal(s) private, but encourage some sharing to obtain and provide support among class members. During the school year, students, teachers, and parents record examples that show the student is attempting to apply this new understanding in daily situations.

Risking Negative Effects

Standard Approach

Students identify various types of tobacco products. The teacher defines the term nicotine and class members identify the body parts affected by nicotine. In small groups, students list the health problems related to using various types of tobacco products.

Remodeled Approach

Assumptions

1. Examining personal influences in lessons about the effects of alcohol and other drugs increases the lessons' relevance for students.
2. Individual students are influenced by different forces.
3. At an early age, students begin to develop a pattern of response to the influences in their lives.
4. This pattern of response to influences sometimes enables children to ignore the effects of alcohol and other drugs.

Objectives

The student will be able to

- identify the influences that enable him or her to ignore the potential negative effects of his or her choices.
- compare and contrast influences on choices not related to AODA and those with AODA-related choices.
- over time, trace his or her individual ways of dealing with the potential negative effects of his or her choices.

Related Student Outcomes

Influences on AODA Conceptualization

A. What new ideas am I learning about alcohol and other drug abuse?
B. Where and how has this new AODA information been learned?
E. What are my words and actions teaching others about alcohol and other drugs?
G. What is peer pressure? What distinguishes good pressure from bad pressure?
J. How does my use of peer pressure affect others?

Effects of Alcohol and Other Drug Abuse

A. How do alcohol and other drugs affect the mind and body?
B. How do I distinguish between positive, negative, or mixed effects of alcohol and other drugs?
C. When might the bad effects of alcohol and other drugs seem good to a person?

D. What personal skills do I have or need to develop to stay away from unsafe risks?
E. What are my personal traits that make it difficult for me to stay safe and healthy?

Background and Planning Questions for the Teacher

1. How consistently do I avoid substances and situations that have the potential to affect me negatively?
2. What forces influence my actions in these situations?
3. How are these influences similar to those my students may experience when faced with decisions about alcohol and other drugs?
4. Does information, such as evidence from experts on negative or beneficial effects, influence my actions? When? For what kinds of things? Why or why not? Does age make a difference? Do feelings make a difference?

Classroom Activities

In small groups, students are given the task to research the effects of chocolate and nicotine on the human body. The lists of effects may be found through various sources, including textbooks, articles, interviews, and personal experiences. Remind the students that they will need to justify the reliability of the sources of their information. The lists of effects they generate are to be as complete as possible, including positive and negative effects over the short and long terms. This exercise may be done during one or several class periods, as homework, or as a combination of the two.

Once each group has completed the task, the groups report their findings on the effects of chocolate and nicotine. The findings are recorded on the blackboard or overhead to generate one complete class list. Contradictory findings may be challenged in part concerning the reliability of the source of information. Once a satisfactory list of effects has been generated, the students add it to their notes by placing a check mark by the effects they were aware of before the small-group exercise.

Large-Group Discussion

Discuss the following questions:

- Are the potential negative effects of eating chocolate well-known by the average person?
- Raise your hand if you have eaten chocolate more than three times this school year, this month, this week?
- Given what we knew about the possible negative effects of chocolate on our bodies, why did we eat the chocolate anyway? Be specific.
- Are the positive outcomes of eating chocolate as important as the negative outcomes of eating chocolate? Why or why not?
- How do the potential negative effects of eating chocolate compare with the potential negative effects of nicotine?

- When you decide to eat chocolate, which effects come to your mind first? Which have the biggest influence on you? Are there effects that you don't ever think about? Explain.
- How might these same reasons influence people who are deciding whether or not to smoke? Give specific examples.

Portfolio Activity

Students name specific factors they feel influence them when they ignore the potential negative effects of the choices they make. Some examples include feelings, personal desires, pressure from friends, and role modeling by adults or siblings.

For the next four weeks, students record examples from their own lives when they made a conscious decision to do something that they knew could have negative effects for them. Where possible, encourage the students to name the factors (feelings, people, cultural norms, lack of skills, beliefs, conceptualizations, and so forth) they believe influenced them to risk the negative effects.

Using the examples collected during the four weeks, the students identify one of the influences they are willing to try to resist. During the next four weeks, students look for the presence of that influence in their decisions, practice counteracting it, identify the forces that give them the ability to assess risk, and examine other peoples' responses to the same people, feelings, and norms.

Note to the teacher: These portfolio activities assume that the students have had previous lessons dealing with refusal skills, assertiveness, and so forth.

Consequences of Decisions

Standard Approach

The teacher leads a discussion about how decisions are made and how a person's decisions affect others. Given a variety of case studies, the students brainstorm how the decisions made in the case studies might impact other people.

Remodeled Approach

Assumptions

1. Personal health choices have consequences for the individual, his or her family, the community, and society.
2. Students' decision-making processes may be influenced when they are able to see the consequences of their decisions from varying perspectives and when they are able to care about the risk or negative effects and care about the welfare of others.
3. Understanding that health-related choices have consequences for others sometimes provides additional motivation for people to make more reasoned choices.

Objectives

The student will be able to

- examine AODA-related decisions in terms of the consequences for others.
- acknowledge that a helpful behavior to learn, practice, and begin to use is a decision-making process in which he or she considers effects and safety.
- develop enthusiasm for practicing use of this decision-making process.
- challenge oneself and others to use this decision-making process.
- ask questions about why the decision-making process is not used by oneself and others.
- examine personal decisions for potential consequences for oneself and others.
- modify his or her decision-making process to take into consideration the consequences for oneself and for others.

Related Student Outcomes

Influences on AODA Conceptualization

C. What beliefs about alcohol and other drug abuse do I hold that might be biased or stereotyped?

Effects of Alcohol and Other Drug Abuse

B. How do I distinguish between positive, negative, or mixed effects of alcohol and other drugs?

C. When might the bad effects of alcohol and other drugs seem good to a person?
D. What are alternative ways to feel good without using alcohol and other drugs?

Rules About Alcohol and Other Drugs

D. What are consequences of breaking rules related to alcohol and other drugs?

Keeping Safe from Alcohol and Other Drug Abuse

B. What criteria do I use to label the risks I take as positive or negative?
D. What personal skills do I have or need to develop to stay away from unsafe risks?
E. What are my personal traits that make it difficult for me to stay safe and healthy?

Background and Planning Questions for the Teacher

1. What motivates me to avoid risky behaviors related to alcohol and other drugs?
2. What motivates my students to avoid risky behaviors related to alcohol and other drugs?
3. What consequences do my decisions to avoid risky behaviors related to alcohol and other drugs have for my students, my family, and myself?
4. What consequences have the most influence on the decisions I make?
5. Would this be the same for my students? How might their perspectives differ from mine?
6. How often do I use a decision-making process and examine effects for safety, well-being, and health?

Classroom Activities

The teacher reads the following story to the students.

Teresa, an eighth grader, and her younger sister Suzie are discussing Teresa's upcoming graduation party. Teresa's parents have told her that she may choose the menu. Remembering the gooey chocolate cake her brother had for his graduation party, Teresa puts it first on her food list. When Suzie reads the list she cries, "Teresa, we can't have cake! My teacher says cake has sugar in it, and sugar causes cavities. The dentist filled two cavities in my teeth last week and it hurt!" The girls' mother, overhearing this remark, explains that a little sugar is OK, but too much sugar causes cavities. Teresa suddenly says, "Wait! I wanted to invite Mary Lou to my party. She's allergic to chocolate. If I have chocolate cake, what will she eat?" Suzie exclaims, "I know! We can have frozen strawberry yogurt. That doesn't have lots of sugar. I won't get cavities, and Mary Lou can eat it, too!"

Large-Group Discussion

Discuss the following questions:

- What possible negative effects did Suzie see in eating the sugary cake?
- What are other possible negative effects that Suzie, her mother, or older sister did not mention? How do you know these are accurate?
- Why did Teresa (the older sister) even consider a cake if there were so many potential negatives to eating it?
- Who benefits from the family's decision to have frozen yogurt instead of a sugary cake? Give as many examples as you can. How do family members benefit?
- Who was Suzie thinking about when she suggested eating the frozen yogurt?
- Can you think of a time when you decided to do something that was good for you and also turned out to be good for someone else? Explain.
- Can you think of a time when someone made a decision for their own benefit, but it also benefited you? Explain.
- Examine the following decisions and determine who might benefit and what the benefit might be.
  - — a pregnant woman quits smoking
  - — an adult has too much to drink and calls a cab to get home
  - — an adult chooses not to drink

Homework

During the next two weeks, students collect examples of decisions they make that they feel have no impact or consequences for others, and only have consequences for themselves. Students choose two of the best examples and hand them in to the teacher.

The teacher writes the examples on index cards, and each student in the class picks two cards at random. Students examine the decisions to identify if indeed no one else is affected by the decision. If another person would be affected, the student writes who would be affected and what the effect(s) might be. Students share their work in a large group.

Large-Group Discussion

Discuss the following questions:

- Why could some classmates see consequences for these decisions that others could not?
- How many decisions do you think a person makes that have no effect on someone else? Justify your answer.
- How might our school, families, and communities be better if people understood that their decisions have consequences for others?
- What might our school, families, and communities be like if people never considered how their decisions affect others?
- How can people check to make sure that the decisions they think only affect them do not also affect others?

Portfolio Activity

Students review the remaining examples of the decisions they recorded as homework that appeared to have no consequences for others. Students answer the following questions for each example:

- Do you still believe that this decision affected no one but you?
- If yes, how can you check to be sure that your belief is accurate?
- If you have changed your mind, why do you think differently now?

Summary Essay: What specific actions can I take when making future decisions to be sure that I am making a decision in my own, my family's, and my community's best interests?

For the rest of the school year, students accumulate examples that show they are beginning to include these actions in their decision-making process.

Decision-Making Case Study

The teacher hands out a case study on decision making, and students are to identify the steps the characters used to reach a decision.

Standard Approach

Remodeled Approach

Assumptions

1. People sometimes make decisions without thinking.
2. It is easier for some people to reflect on the decisions they make than it is for others.
3. Not all actions, including AODA actions, are based on conscious decisions.

Objectives

The student will be able to

- differentiate between reflective decision making and reflexive decision making.
- observe outcomes from both reflective (with thought) and reflexive decisions (without thought) and assess the outcomes for the degree of safety, well-being, and benefit to his or her health.

Related Student Outcomes

Keeping Safe from Alcohol and Other Drug Abuse

A. What skills and attitudes am I practicing to keep myself safe and help others keep safe from AODA?
E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?
G. What responsibility to others do I have to make safe choices about alcohol and other drugs?

Background and Planning Questions for the Teacher

1. In what types of decision-making situations do I respond reflexively?
2. In what types of decision-making situations do I respond reflectively?
3. Do I ever assess the outcomes from a reflective or reflexive decision, looking for the degree to which the decision promoted or hindered safety, well-being, or health?

4. Would my students react as I do to these same situations? Why or why not?
5. What understanding is necessary before a person is able to react reflectively in AODA-related situations?
6. How do I develop a positive attitude about learning to use behaviors that are helpful even though they are almost impossible to learn and use in our busy lives?

Classroom Activities

To elicit the students' prior knowledge about making decisions with or without a decision-making process, the teacher directs students to observe themselves for one week and notice and record the following:

- What decisions were made?
- On a scale of 1 to 5, rate the extent of thinking before the decision.
- If there was thinking before the decision, identify thoughts that were related to safety, well-being, and health.
- Describe the attitudes and feelings associated with the decision.
- On a scale of 1 to 5, rate the skill you have in using reflective (thoughtful) decision-making behaviors in this situation.

The teacher leads a discussion of observations from the assignment to help students get better at observing what they know and feel about skills and attitudes related to reflective and reflexive decisions.

The teacher focuses attention on the understandings students have yet to develop concerning the differences between reflexive and reflective decisions, including the characteristics of each kind of decision, and the importance of using reflective decision-making processes in high-risk situations.

Read the following case studies to the class.

1. Sarah and her older sister Jessica are going for a bike ride with other kids from the neighborhood. Thinking of her bike-safety lesson in school, Sarah stops on her way out the door to pick up the bike helmet her parents bought for her birthday. When Jessica sees Sarah put on her helmet, Jessica teases her younger sister and says "nerds wear helmets." Sarah considers leaving her helmet at home, but she decides they will be riding on busy streets and she is worried about what may happen if she doesn't wear her helmet. When they reach Jessica's best friend's house, Kate is waiting for them and is wearing her bike helmet. Together the three girls ride onto a busy street, and Sarah wonders if Jessica has forgotten her comment about nerds wearing helmets. Sarah calls out to Kate: "Hey Kate, Jessica says only nerds wear helmets." Kate responds: "That's OK, I like wearing my helmet." Jessica remains silent.

2. A group of middle-school students are hanging out at the park after school. Matt pulls out a pack of cigarettes from his pocket and passes it around. Amy takes one and hands the pack to Brian. Brian says he can't smoke because he wants to join the track team this spring and hands the pack to Nicole. Nicole quickly passes the pack to Matt when Amy says

"What's the matter, too good for a cigarette?" Nicole responds, "Shut up!" and she takes a cigarette.

Large-Group Discussion

For some people, both situations are nondecision-making situations. Instead, there is a reflexive response, and the person doesn't think or think much about the action.

Discuss the following questions:

- In each story, which characters made decisions on reflex? How do you know?
- In each story, which characters thought about the decision they made? How do you know?
- In each story, which characters considered their situation a low-risk decision? How can you be sure?
- Why do people respond to these situations in different ways?
- Might people respond differently to the same situation at different times in their lives? Explain.

The teacher and students then summarize what they are beginning to understand about reflective and reflexive decisions in themselves and others.

Portfolio Activity

Students reflect on the following questions and record their answers.

- In what situations do you respond differently (reflectively rather than reflexively) today than you did when you were younger?
- Do you know why you respond differently?

Students continue to observe themselves, focusing on skills, attitudes, and feelings that are present when they make reflexive and reflective decisions. Students select a skill they need to learn and practice in order to improve their assessment of results and consequences before and after decisions. They might also select an attitude or feeling they need to experience more often if they are going to more frequently do this assessment before and after making decisions.

Categories of Decisions

Standard Approach

The teacher explains the need for having a concrete process to use when making decisions. A five-step decision-making process is explained for students. Students use this process to role play decisions about situations described on a worksheet.

Class members discuss the decisions they made for the worksheet situations. The teacher explains that decision making is an important skill for students to learn.

Remodeled Approach

Assumptions

1. People sometimes categorize the decisions they make based on the amount of risk they perceive.
2. Not all students categorize alcohol and other drug use as a high-risk decision.
3. Much AODA activity is not based on conscious decision making.
4. Much human activity occurs without a decision-making process.
5. We might call an action a decision but rather than involving deliberate, reasoned thought, it is a reflexive act that is our usual way of responding.

Objectives

The student will be able to

- explain the different meanings and attitudes he or she holds for low-, medium-, and high-risk decisions.
- justify the appropriateness of the way he or she categorizes AODA decisions.
- monitor behaviors and categorize them as reflexive or reflective.
- identify personal characteristics that promote reflexive and reflective decision making.
- identify external conditions that promote reflexive and reflective decision making.
- monitor the relationship between personal and external conditions that lead to reflexive and reflective decision making.

Related Student Outcomes

Keeping Safe from Alcohol and Other Drug Abuse

A. What skills and attitudes am I practicing to keep myself safe and help others keep safe from AODA?

E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?

G. What responsibility to others do I have to make safe choices about alcohol and other drugs?

Background and Planning Questions for the Teacher

1. How will the way I categorize decisions influence my ability to teach these concepts?
2. What are and have been major influences on the way I make decisions?
3. Do I categorize decisions today the same way I categorized them when I was the age of my students? Why or why not?
4. What are current examples of low-, medium-, and high-risk decisions that I make?
5. Are there some high-risk decisions that I, my family, and my friends, make that are not categorized as such? Why or why not?
6. On what grounds do I, my family, and my friends justify this failure to categorize decisions as high risk?
7. What criteria do I use to categorize a decision as low, medium, and high risk?
8. Do I ever glorify risk taking that in the long run leads to a deterioration in health and well-being?

Classroom Activities

Present the following questions to students before the lesson is introduced. Provide adequate time for students to formulate responses. Encourage students to rethink these questions and add to their answers as the lesson progresses. The time needed for students to deal with these questions will vary from class to class.

- What makes one decision different from another?
- What are important issues to consider when making a decision?
- Do all people view decisions from the same perspective?
- Do all situations require decisions? Why or why not?

Large-Group Activity

Place a variety of objects familiar to all students on a table in front of the room (for example, rulers, staplers, pens, pencils, fruit, books, cookies, hangers, bandages, combs, yarn, mirrors, scissors, soda can). Ask several volunteers to come forward and demonstrate the various ways these items could be grouped in categories. Have each volunteer go one at a time.

It is important that each student groups and labels the categories without help from the teacher or other students. As each student puts the objects in groups, he or she must explain why the items were grouped in such a way (explain the reasoning). The role of the teacher and other class members is to check for consistency in the student's categorization.

Large-Group Discussion

Discuss the following questions:

- What did this exercise tell you about the way people perceive things?
- How can we check for consistency in the way we group and label things, ideas, or people?
- What advantage did the last students have over the first students?

Homework Assignment

Provide each student with a handout describing 20 to 25 decision-making situations that include, but are not exclusive to, AODA-related situations (for example, choosing what to watch on television, smoking cigarettes, deciding to break up with a boyfriend or girlfriend, choosing a birthday gift).

Direct the students to categorize these situations as low-, medium-, or high-risk decisions according to their own criteria. Students must be prepared to define low-, medium-, and high-risk decisions as well as justify their own criteria.

Large-Group Activity

Ask student volunteers to share their lists of low-, medium-, and high-risk situations. Students then explain the meanings they hold for the terms low, medium, and high risk. The class examines this information for consistency between the way the student categorized the homework situations and meanings the student holds for low-, medium-, and high-risk situations. Repeat this process with other student volunteers.

Large-Group Discussion

Discuss the following questions:

- What has this exercise told you about the way people categorize decisions?
- How can people check that the way they categorize decisions is appropriate?
- Should all AODA decisions be categorized as high risk? Why or why not?
- Give more examples of low-, medium-, or high-risk AODA decisions.
- What other labels could you put on these categories besides low, medium, and high risk?

Portfolio Activity

Monitor your daily behavior one day a week for four weeks; build a collection of examples of normally reflexive low-, medium-, and high-risk behaviors that you are now trying to be more reasoned about.

Effects of Categorization on the Decision-Making Process

Standard Approach

The teacher explains the need to use a concrete process when making decisions. A five-step decision-making process is explained for students. Students use this process to make decisions about situations described on a worksheet.

Class members discuss the decisions they made for the worksheet situations. The teacher explains that decision making is an important skill for students to learn.

Remodeled Approach

Assumptions

1. People adapt their responses to situations and their decision-making processes according to the way they categorize the situations and according to other variables affecting the situation.
2. People can make reasoned decisions through a variety of processes.
3. Many variables (such as time, pressure, other people's perceptions, lack of will, lack of knowledge) make people respond to a situation as a non-decision-making, low-risk situation.

Objectives

The student will be able to

- explore the degree to which his or her categorization of a situation influences his or her decision-making process.
- develop a process for making reasoned decisions in low-, medium-, and high-risk AODA-related situations.
- explain the variables (feelings, unhelpful people, habits, traditions, emotions, and so forth) that influence a person to respond in a nondecision-making (reflexive) mode to a given situation.

Related Student Outcomes

Keeping Safe from Alcohol and Other Drug Abuse

A. What skills and attitudes am I practicing to keep myself safe and help others keep safe from AODA?

E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?

G. What responsibility to others do I have to make safe choices about alcohol and other drugs?

Background and Planning Questions for the Teacher

1. Do I consistently use the same decision-making process in all situations? Why or why not?
2. What elements of that process change from situation to situation?
3. Have I consistently used one decision-making process over my lifetime? Why or why not?
4. What influences shape the decision-making processes I choose to use?
5. What are the consequences of the decision-making processes I use?
6. What decision-making processes have I taught to other classes?
7. What decision-making processes have I learned in my lifetime?
8. What decision-making processes are promoted by today's popular culture? Why?

Classroom Activities

Present the following questions to students before the lesson is introduced. Provide adequate time for students to formulate their responses. Encourage students to rethink these questions and add to their answers as the lesson progresses. The time needed for students to deal with these questions will vary from class to class.

- Think of a difficult decision you made recently. List the thoughts you had and the actions you took to reach this decision.
- Think of an easy decision you made recently. List the thoughts you had and the actions you took to reach this decision.
- How are these processes similar and different?

Individual Activity

Generate an example of each category of decision-making situations (low, medium, and high risk) and write all the steps that might be needed to reach a decision in that situation.

Large-Group Discussion

Discuss the following questions:

- How does the decision-making process change from category to category?
- Why do these changes occur?
- What does this tell you about the way you make decisions?
- What might be the consequences of not being aware of how you categorize your decisions?
- What can you do to be more aware of the categories in which you place your decisions?
- How can you tell if the process you use to make decisions is a good one?
- Do all people have to use the same process for making decisions?
- If people use different decision-making processes, what are some important steps individual decision-making processes should include?

Portfolio Activity

For one week, students observe themselves in situations in which they respond reflexively and reflectively. Record the variables (such as feelings, emotions, people, time of day) that seem to be operating in each situation. After recording for a week, try to identify the variables in reflective situations that are not present in reflexive situations.

In class, the teacher leads a discussion of factors that promote reflexive responses and factors that hinder reflective decisions.

The following week, students continue to observe themselves to verify the accuracy of the class discussion.

In small groups, students discuss the following questions:

- To what extent do these factors apply across high-, medium-, and low-risk situations?
- What factors seem most often to contribute to reflexive responses in high-risk situations?
- To what extent do reflexive decisions in high-risk situations relate to one's failure to consider the long-term welfare of oneself and others and instead focus on short-term, immediate gratification?
- What factors seem most often to contribute to high-risk, negative responses?

For the next week, students identify the attitudes, information, understanding, and/or skills they hope to develop in order to be more reflective or to develop to counteract a factor that influences them to make reflexive decisions. The teacher provides class time for students to discuss, practice, role play, and write about their progress.

During the remaining school year, each student documents, in his or her portfolio, examples of the times he or she was able to make decisions less reflexively or more reflectively.

Laws Related to Alcohol and Other Drugs

Students are assigned to groups to research past and present laws related to alcohol and other drugs. Using this information, students construct a timeline of laws related to alcohol and other drugs in U.S. history and choose one law to report about to the class.

Standard Approach

Remodeled Approach

Assumptions

1. Exploring the context behind laws related to alcohol and other drugs enables students to view such laws from a broader perspective.
2. Analyzing the context surrounding laws related to alcohol and other drugs increases the laws' relevancy for students.
3. Change occurs in societies when certain social forces are present.

Objectives

The student will be able to

- analyze the social, economic, political, and historic contexts influencing changes in national laws related to alcohol and other drugs.
- compare current social, economic, and political conditions with the conditions present during major changes in national policy regarding alcohol and other drugs.
- consider future possibilities in local, national, and world policies concerning alcohol and other drugs based on relevant social conditions.

Related Student Outcomes

Influences on AODA Conceptualization

A. What current economic, cultural, and social factors promote alcohol and other drug abuse?
B. To what extent have tobacco, alcohol, and other drugs permeated my culture and community?

Rules About Alcohol and Other Drugs

G. What is the basis of the school's, community's, and society's thinking that generated current laws and policies related to alcohol and other drugs?
H. How can a person differentiate norms from rules and laws related to alcohol and other drugs?
I. What are the implications for myself and others if the majority of people in society choose to ignore rules and laws related to alcohol and other drugs?

K. What are justifiable criteria for judging the fairness of rules, laws, policies, and norms related to alcohol and other drugs?
L. If rules, laws, policies, and norms related to alcohol and other drugs are proven unfair, what is the appropriate response for individuals and society?

Keeping Safe from Alcohol and Other Drug Abuse

A. What skills and attitudes have I developed that help keep me and others safe and healthy in relation to AODA?
B. How consistently do I apply these skills and attitudes in AODA-related situations?
G. How can I become involved in the social systems that exist to
- develop positive skills and attitudes in citizens?
- help those with AODA-related problems?

H. How can I become an advocate for AODA programs in my school and community?

Background and Planning Questions for the Teacher

1. What value does accurate knowledge of past and present laws related to alcohol and other drugs have for me? For my students?
2. What social, economic, political, and historic factors have prompted my school district to develop an AODA curriculum?
3. How are these contextual factors similar to those that motivate passage of laws related to alcohol and other drugs?
4. How does a person's ability to examine the social, economic, political, and historic contexts of any event related to alcohol and other drugs benefit that person and his or her community?

Classroom Activities

The teacher directs students to find examples of laws, rules, and regulations that have contributed to citizens' health, safety, and well-being. Students discuss possible social conditions that led to the enactment of these laws? Direct the students to write a sample letter to the editor of the local newspaper expressing support for one of these laws. Students include their rationale for supporting the law as related to one or more of the fundamental principles they have studied in past and present AODA lessons.

Divide the class into groups. Have each group choose one of the following pieces of legislation:
- prohibition
- banning of cigarette ads from television
- raising the legal drinking age to 21

Students research these questions.

- What were the social, economic, political, and historic contexts at the time the law was enacted?
- How might these different contexts have contributed to or worked against the passage of this legislation?
- What is the present status of this law, and what are the current social, economic, and political contexts that support this status? Provide documentation to justify your answer.

Large-Group Presentation and Discussion

Each group presents its findings to the large group. A summary of each group's presentation is distributed to each student.

Students discuss the following questions:

- What are the common social conditions that appear to promote change concerning the issue of alcohol and other drugs in these three cases?
- What are some proposed laws and policies related to alcohol and other drugs in our school, community, state, or nation?
- What forces are working for these laws and what forces are working against these laws? Provide documentation for your answers.
- What groups might benefit from these laws? What groups suffer because of them?
- Based on the current social conditions, consider whether society will reject or endorse these proposed laws? Justify your answer.
- What laws or rules might students consider proposing concerning alcohol and other drugs?

Portfolio Activity

1. Predict the success or failure of current proposed laws related to alcohol and other drugs. Choose one proposed law to follow and compile newspaper clippings, magazine articles, and so forth related to this issue. By the end of the semester, write a status report, including whether or not your prediction has changed, major developments, new ideas, and surprises. Describe how future passage or defeat of this law might affect you.
2. How does the ability to view legislation related to alcohol and other drugs from its social, economic, political, and historic contexts help you
   - to keep safe from alcohol and other drugs?
   - to become an advocate for AODA programs?
   - as a future voter?
3. What other skills and abilities were used to complete this assignment? In what other circumstances or situations might you be able to apply these skills?
4. What are examples of situations where you have consciously chosen to apply these skills for your benefit and/or that of others?

Practicing AODA Prevention Behaviors and Attitudes

Standard Approach

Most curricula teach AODA skills separate from one another. Students focus on an individual skill for the duration of a unit. Evaluation is generally information based.

Remodeled Approach

Note to the teacher: Ideally, this lesson is a process that students initiate in ninth grade and continue through 12th grade. At a minimum, an entire semester is allocated for practicing the self-selected behavior and/or attitude.

Assumptions

1. Acquiring new behaviors and attitudes is not a linear process, but rather it is a cyclical and unpredictable process.
2. Essential factors in modifying existing or developing new behaviors and attitudes (self-directed change) are
   - support systems;
   - opportunities for practice and self-reflection;
   - opportunities to teach others what has been learned;
   - an ability to see the relationships among the new behavior and/or attitude, old behavior and/or attitude, and new information;
   - internal motivation;
   - an ability to fail and learn from failure;
   - adequate time; and
   - knowledge and understanding of self-directed change.
3. Development of these behaviors can contribute to students' abilities to prevent other problems, such as eating disorders, suicide, and teen pregnancy.

Objectives

The student will be able to

- concentrate on self-directed change in one area over time.
- explain the relationships among AODA-related lessons, other courses taken, and the change he or she is attempting to make.
- utilize personal experiences to create a lesson for other students concerning the change he or she is attempting to make.
- analyze influences, processes, successes, and failures experienced while making this change in his or her life.

- explain the importance of changing behaviors and/or attitudes for his or her personal benefit and the benefit of others.
- establish and utilize a support system for maintaining the new behavior or attitude.

Related Student Outcomes

All of the grades 9 through 12 student outcomes for each content area are applicable.

Background and Planning Questions for the Teacher

1. What behaviors and attitudes keep me from having problems with alcohol and other drugs?
2. How did I learn them? What information did I need, what support did I need, and what experiences did I have that helped to reinforce and build these behaviors and attitudes?
3. How can I create opportunities for my students to obtain the necessary information, support, and experiences to develop similar behaviors and attitudes?
4. How long did it take me to become proficient in utilizing one or more of these behaviors and attitudes?
5. What can I realistically expect my students to achieve in personal development in four years? One year? One semester?
6. How do the other AODA-related lessons that I teach relate to the development of appropriate AODA-prevention behaviors and attitudes?

Classroom Activities

Students identify a habit, belief, or attitude they consciously made an effort to change in the past (such as losing or gaining weight, getting better grades, being on time). Thinking about this experience, each student writes a description of

- the progress he or she achieved over time in making this change.
- the influences, rules, attitudes, and behaviors that contributed to his or her success or difficulty.
- the techniques and information that others (such as teachers, parents, psychologists, and doctors) have found to be helpful in bringing about change.
- the value his or her experience and others' research and knowledge have for helping the student make similar changes to prevent AODA and promote personal health and safety.

In small or large groups students share their experiences with self-directed change.

At the beginning of ninth grade, students are given copies of all the outcomes for grades 9 through 12 listed in Chapter 2. Students are asked to pay particular attention to the outcomes in the content area Keeping Safe from Alcohol and Other Drug Abuse. Students also are directed to look through their portfolios to identify the skills and information their teachers have been teaching in AODA-related lessons. Students must be given

adequate time to reread, think about, and discuss their past learning experiences and identify the major behaviors and attitudes their teachers were trying to help them develop.

At this point, students should be adequately prepared to examine the outcomes they are expected to meet by the end of 12th grade. Based on this information, each student chooses a behavior or attitude he or she is interested in further developing during the next four years.

In their portfolios, the students identify the behavior(s) or attitude(s) they have chosen to work on and describe their current ability and understanding of that skill. Encourage the students to give specific examples of situations in which they have used the behavior or attitude and examples of situations in which they would have liked to use the behavior or attitude but were unable to.

Unlike previous sample lessons, this activity is ideally designed to carry through the entire senior high school years. Therefore, there are no specific activities that are required of each student. This is a student-directed project. However, the following activities are some suggestions for facilitating this process:

- At regular intervals (such as each week, every-other week, monthly) the teacher devotes a class period to discussing the students' progress making a specific behavior or attitude change. Participation is voluntary and discussion may begin in small groups. After the small-group discussions, it is important to continue as a large group. Suggested questions include
  - — What successes have you had in changing your behavior or skill?
  - — What suggestions can you give others for overcoming difficulties in learning new behaviors and attitudes?
  - — What groups, situations, or feelings seem to make it difficult for you to maintain this change?
  - — What groups, situations, or feelings seem to make it easier for you to maintain this change?

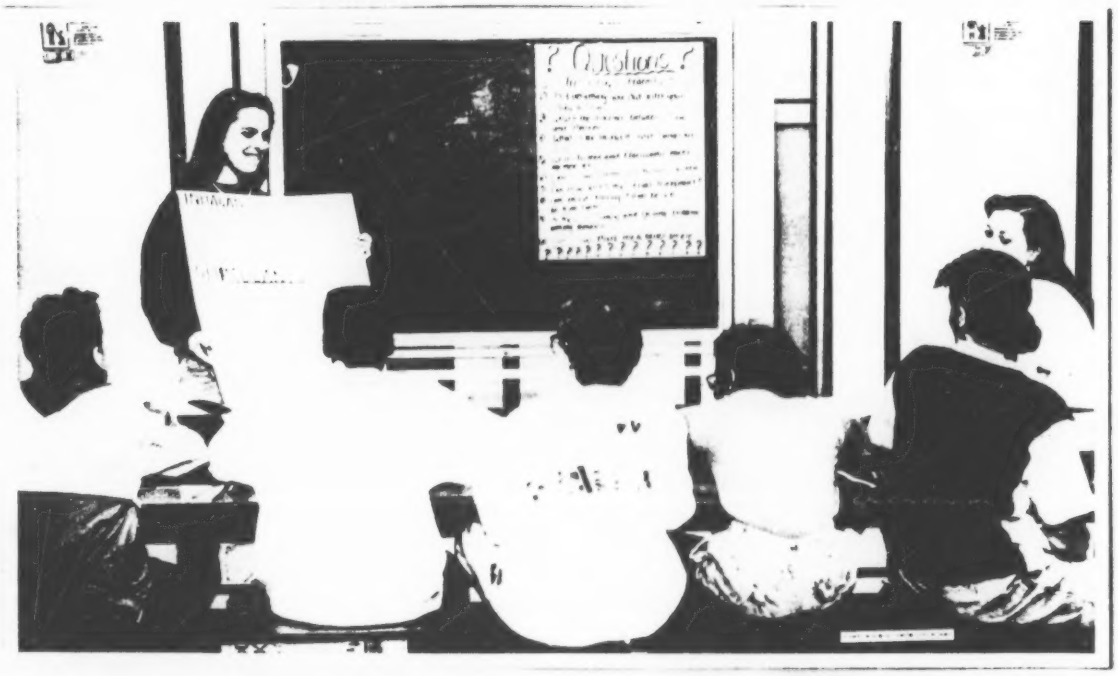
  After these discussion sessions, direct students to record in their portfolios new understandings and insight they have obtained from the discussion.
- After several semesters of practice and discussion, students attempting to make similar changes work together to create a lesson about their behavior or attitude. Students must identify their target audience, objectives, assumptions, related student outcomes, background and planning questions, and classroom activities. Before the lesson can be delivered, the students must justify the reasoning behind the content and activities they have chosen. The teacher's role is to check the lesson for consistency, accuracy, age-appropriateness, bias, or stereotyping. When the lesson is satisfactorily prepared, the students may present the lesson to their target audience or a placebo group.
- In their portfolios, students describe the relationship between the change they are attempting and the content of other classes. For example, if a student is trying to develop the skill of effective communication and has just completed a lab assignment in science, he or she may see a connection between the lab work and the ability to communicate effectively with a partner, with the teacher, within written assignments, or when asking questions.

Culminating Activity

Whether this self-directed change occurs over the course of four years or one semester, at some point the student must be able evaluate his or her success. Student outcomes A through H pertaining to Keeping Safe from Alcohol and Other Drug Abuse might constitute an evaluation tool to help the student relate his or her experiences in developing this skill to outcome questions. Students who lack effective written communication skills need to be given alternative methods for describing and analyzing their experiences, such as an interview, videotape, or audiotape.

Implementation

AODA Advisory Committee
Comprehensive Implementation Strategy
Appraisal
Plan of Action
Delivery
Evaluation
Summary



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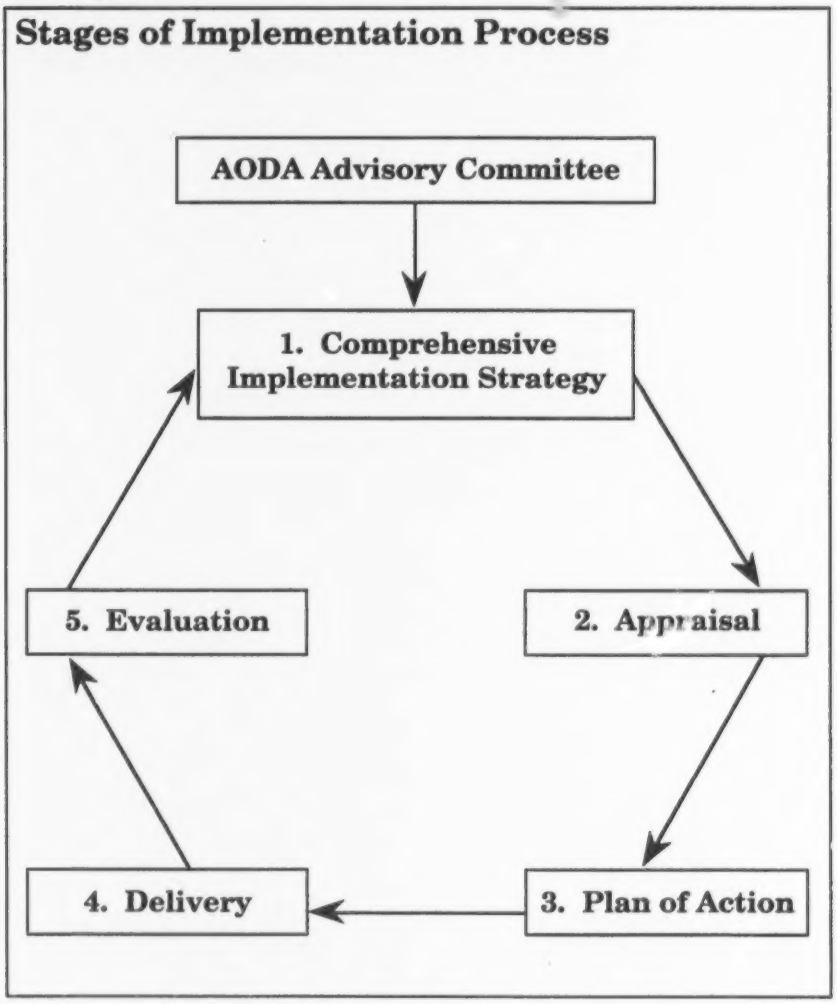
This chapter explores implementation as it applies to the curriculum component of a comprehensive K-12 AODA program. *Alcohol and Other Drug Abuse Programs: A Resource and Planning Guide* (Wisconsin DPI) details the implementation process recommended for school districts to use when developing a comprehensive AODA program. That process is directed by the AODA Advisory Committee and includes five stages: the initial formation of an overall comprehensive strategy, the appraisal of local conditions, the plan of action, the delivery of specific programs, and evaluation (see Figure 4).

Figure 4



AODA Advisory Committee

The AODA Advisory Committee is the driving force behind AODA program implementation. This type of team approach prevents the burden of program implementation from falling on the shoulders of one person, such as an administrator or AODA coordinator.

Careful selection of advisory committee members results in a committee that is reflective of the community and school in terms of race, gender, age, and agency affiliation (school, law enforcement, human services). An advisory committee that represents community demographics and includes people who can influence policies and practices has greater potential to help the program it serves.

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Because K-12 curriculum is the foundation of any AODA program, it is critical that the advisory committee include one or more people familiar with curriculum at all grade levels. The advisory committee gives direction to and advocates for AODA programs. If the committee's direction is to be relevant to classroom teachers—those people who actually deliver the curriculum—that direction must be realistic.

AODA curriculum does not exist in isolation. Effective AODA instruction is integrated in existing subject areas with logical ties to AODA, such as health, developmental guidance, family and consumer education, and social studies. With this in mind, some districts choose to mesh the AODA advisory committee with other existing committees, such as at-risk and human growth and development. This blending of programs helps eliminate duplication of effort or contradictory means of dealing with the same topic. It also may open lines of communication and understanding.

Comprehensive Implementation Strategy

A major responsibility of the AODA advisory committee is the development of a comprehensive implementation strategy or long-range plan. In developing this strategy, the advisory committee comes to a consensus as to which program components the district needs and the best time to initiate them. Because the comprehensive strategy looks at all elements of a comprehensive AODA program, at some point the committee will establish a timeline for AODA curriculum development and delivery. There is no one "correct" time to focus on curriculum development, but the decision to do so may be influenced by numerous factors, including

- funding. Federal Drug Free Schools entitlement dollars, available to school districts since 1987, require AODA prevention programs in all grades in the district (including early childhood programs) as a condition for receiving federal funds. Likewise, certain state AODA funds are based on the existence of, or need for, AODA curriculum in grades K-12. Certainly, districts receiving or considering outside funding may need to develop AODA curriculum to establish eligibility.

- staff interest. District staff members delivering AODA programs may see the need for curriculum at specific grade levels, or they may be interested in updating existing AODA curriculum materials. Staff interest is essential for successful implementation of any initiative and should not be ignored in planning.
- expansion of prevention aspect. Some elements of the comprehensive AODA program may be classified as more related to prevention (curriculum) and others to intervention (Student Assistance Program). Some districts have strongly developed intervention program components but have devoted less time to prevention. AODA curriculum as a prevention strategy reaches all students and is an excellent way to set the tone of the district's AODA efforts. When focusing on prevention, curriculum is the logical place for most districts to begin.

Regardless of the reasons for focusing on curriculum, it is essential that the advisory committee considers it a district priority. Such consensus and commitment make it easier to access necessary resources to complete the task. In addition to recommending priorities and allocation of resources, the committee must establish timelines for curriculum development. However, when curriculum is identified as a priority, the committee may not know the scope of what exists, what is possible, or what is needed. Therefore, complete timelines continually evolve as implementation takes place.

Appraisal

Implementation of AODA curriculum requires appraisal in two levels. Initially, some thought must be given to the existing conditions in the school and community. What challenges are students facing concerning AODA? What is the drug of choice? What is the most common age of first use? Have successes and failures varied according to the age, gender, race/ethnicity, or socioeconomic status of the students? If so, how can prevention efforts be improved? What prevention efforts have been used in the past? Why have they been effective or ineffective?

Answers to questions such as these help clarify the issues that must be included to make the AODA curriculum relevant to local conditions. The answers may be found through student use-and-attitude surveys, parent and student interviews, and staff meetings.

The current AODA instruction also must be appraised. Too often when a district identifies a curricular area as a priority, curriculum packages are purchased and given to teachers without a proper assessment of what already exists in the classroom. When this occurs, teachers become resentful, resources are not properly utilized, efforts are duplicated, and program advocates become frustrated.

Assessing current conditions is the process of determining

- what is currently being taught in grades K-12 specific to AODA;
- how effective it is in preventing AODA by students;
- what materials are being used or are needed;
- to what extent materials are up-to-date and culturally relevant;

- if teachers currently providing AODA prevention instruction have been appropriately trained;
- how recently teachers were trained in prevention and who provided the training;
- which teachers have been involved in other successful prevention curriculum efforts;
- if philosophy (for example, no use vs. responsible use) is consistent across all grades, subject areas, and materials;
- if lessons are sequential and developmentally appropriate for each grade;
- if lessons are indepth enough for students to gain conceptual understanding, develop positive prevention attitudes, and practice prevention behaviors;
- if, in grade levels that do not currently receive AODA instruction, there are teachers who are willing to incorporate AODA lessons;
- if there are students who are not receiving appropriate AODA instruction due to issues such as exceptional educational needs and limited English proficiency;
- if the instructional strategies being used are appropriate, varied, and effective;
- if the instructional approach goes beyond information to develop positive attitudes and behaviors initially under the teacher's guidance and then independently by students; and
- if the district's current AODA curriculum meets state and federal guidelines.

The difficulty in correctly appraising AODA curriculum is finding a way to efficiently gather all the necessary information. In addition, many district teams have unrealistic expectations about the amount of time needed to gather this information. While small districts with staff in one building may be able to complete the process in a few months, larger districts with numerous school buildings may need an entire school year or more to accurately assess the situation.

Each district has individual strengths and weaknesses and preferred ways of working. The following implementation process may be considered as a district determines "where to go" in AODA curriculum.

Curriculum Assessment

A comprehensive curriculum survey is one way to assess the quantity and quality of a district's current AODA curriculum. Survey questions include, but are not limited to, the classes in which AODA-related content is delivered, the amount of class time devoted to that content, the topics addressed, the materials and teaching strategies used, and the training the teacher has received to implement the curriculum.

This type of survey is appropriate for all teachers in the school district. Staff members attempting to assess the current status of AODA education often assume they know which teachers are teaching AODA-specific lessons and limit the survey process to those teachers. Such assumptions are not always accurate and may result in inaccurate or incomplete information.

The surveyor must consider when and how the survey will be done. Administrative support helps teachers understand the survey's importance

to district AODA efforts. Administrators who value AODA curriculum have the power to allocate time (perhaps on inservice days) for teachers to receive the survey, ask questions of the AODA coordinator, and work together to complete the form. In this way, the forms are quickly and consistently completed and returned by all.

Another effective way of gathering the necessary information is to interview teachers. This method promotes dialogue between teachers and the AODA coordinator and helps establish a clearer picture of the current curriculum. The interview approach sometimes is time consuming and requires scheduling because the AODA coordinator must be present to gather the information.

A third alternative is to distribute the survey and follow up with a face-to-face interview. In this way, classroom teachers have time to think about the questions, examine their curricula, and later ask questions. When selecting an appraisal method, the quality of information gained as well as the amount of time needed to complete the appraisal must be considered. However, an appraisal method is best judged according to the quality of the information gained rather than the quantity of time needed to implement it.

Curriculum Matrix

Once a district has assessed its AODA curriculum, the information is transferred to a curriculum matrix. The matrix is a way to display the "big picture" of a district's AODA instruction. Very large districts may need a matrix for each building, grade-level group, or geographic region. Appendix H is a sample matrix designed to illustrate which student outcomes are being addressed through classroom instruction.

By using a matrix, AODA staff members can clearly see which content areas and outcomes are being taught and which are not.

By using a matrix, AODA staff members can clearly see which content areas and outcomes are being taught and which are not. Most districts using this process find that there is a great deal more AODA instruction occurring than was initially thought. However, it may not be taught indepth for conceptual understanding, attitude development, and guided practice.

Correctly used, the curriculum matrix shows which outcomes are being addressed and the subject areas they are infused within. The matrix also begins to illustrate the amount of emphasis being given to each outcome. Those outcomes in the matrix that are left blank become priority areas to help teachers include in their classes.

The results of the completed curriculum matrix may then be checked against the written curriculum guides that outline the district's educational program. What the district publishes as its curriculum often is implemented to varying degrees. For example, while the district science curriculum may indicate that physical effects of alcohol and other drugs are to be taught at grade six, it may not be implemented by all sixth-grade teachers. Thus, the district already has identified an existing vehicle to deliver AODA instruction, however, implementation has not effectively taken place. This contradiction between what is written and what is done makes it clear that one or more of the following conditions may be true:

- The teacher is unaware of the written curriculum.
- The teacher does not have the training needed to teach the concepts and the instructional approach.

- The teacher is uncomfortable with the concept and instructional approach.
- The time allocated is inadequate for the instructional approach.
- Materials may be lacking.
- The written curriculum needs updating.

In any event, the problematic conditions preventing a teacher from implementing the written curriculum must be addressed if AODA content is to be taught.

Plan of Action

At this point, the AODA coordinator or the AODA team member(s) responsible for collecting the curriculum data bring the results back to the advisory committee or curriculum subcommittee if one was appointed. The committee then assesses the situation and creates a plan, including timelines, to fill curriculum gaps and revise weak content areas to achieve K-12 AODA instruction that is sequential, developmentally appropriate, and delivered to every student every year. Under no circumstances should this plan of curriculum development and implementation be devised by one person. The supportive network of a team approach is critical to the success of the process. The team brings a diversity of experience, knowledge, and ability that is not possible with the effort of one person. As previously mentioned, the need for involving administration is paramount to ensuring that curricular change occurs. If administrators are not a part of the committee working on curriculum, at a minimum they must be kept informed throughout the entire process.

To develop a plan for curriculum development and implementation, the committee explores and answers the following questions:

- Does current AODA instruction adequately address local conditions and AODA problems as identified in appraisal?
- Is a prevention program considered a valuable part of the AODA program?
- Is a no-use philosophy consistently communicated at each grade level?
- Are teachers and administrators positive role models for students in relation to alcohol and other drugs?
- Are materials consistent with district philosophy?
- Are materials up-to-date and accurate?
- Are materials biased on the basis of race, gender, handicap, economic status, and so forth.
- Do materials and methods allow for differences in learning styles and ability?
- To what degree are teaching methods and materials consistent with the assumptions of the Wisconsin AODA Curriculum Model?
- Do the methods allow for time to determine differences in students' prior knowledge, students' existing attitudes toward prevention behaviors, and students' existing prevention skills?
- Do the materials allow for time to determine differences in students' environments that promote or hinder prevention attitudes, skills, and knowledge?

- What outcomes and grade levels are currently not being addressed?
- What are the curricular strengths?
- To what degree does duplication of effort exist?
- What should be done to improve the existing condition?
- What money is currently available to devote to this project?
- What timeframe is practical for curriculum implementation?
- Are teachers adequately prepared to deliver the AODA lessons and the instructional approach?
- What is the logical grade level to begin curriculum development or revision?
- Should new curriculum be purchased or teachers given release time to create or revise AODA curriculum?
- Is AODA curriculum included in the AODA policy?

The answers to these questions identiy the degree of work needed in AODA curriculum and help determine the approximate time needed to achieve a complete curriculum. There is not a single plan of action appropriate for all districts. The existing conditions will vary widely as will local resources and timelines for curriculum development. However, the plan of action likely includes the following elements in all districts:

- development of district philosophy and policy regarding AODA instruction
- priority and sequence of development and delivery by grade level
- training plan for classroom teachers
- acquisition or development of materials
- delivery of AODA curriculum
- evaluation

Philosophy and Policy Development

Development of district philosophy and policy regarding AODA instruction requires the committee, including administration and community representatives, to address the issue of consistently communicating a no-use philosophy.

Development of district philosophy and policy regarding AODA instruction requires the committee, including administration and community representatives, to address the issue of consistently communicating a no-use philosophy. Important consideration must be given to the facts about alcohol and other drugs, including

- prevention information, attitudes, and behaviors can be learned and are effective.
- the safety of students and faculty members is compromised in schools with alcohol and other drug problems.
- intoxicated, hung-over, and drug-affected students disrupt the learning environment and interfere with the opportunity of all students to develop to their full potential.
- drinking alcohol is a gateway to drinking more alcohol and to using other drugs. The progression in youth tends to be very swift.
- people who drink alcohol produce and become a part of unpredictable situations. Chances of victimization or agressive behavior increase greatly when alcohol and other drugs are used.
- youths are role models for their peers and siblings. Their use of alcohol or other drugs imparts the dangerous message to other youths in similar situations that drinking and using drugs is acceptable.

- consumption of alcohol is illegal for those younger than 21 years old.
- drug use is illegal and incompatible with learning.

Priority and Sequence

The establishment of priority and sequence clarifies, for the committee, administration, faculty, and other interested parties, the sequence of events to take place as the curriculum is revised or developed. The sequence is not just for the advisory committee; it is a public statement and a committee planning tool.

Training

The development of a training plan recognizes that teachers are not likely to teach what they do not understand. Likewise, teachers most often teach content from their own perspective unless provided with a basis of common understanding. All teachers need training or professional development in three areas to deliver the Wisconsin AODA Curriculum Model.

First, all teachers expected to deliver AODA instruction need to be familiar with basic AODA issues. Providing teachers with training in prevention strategies as well as basic AODA team training gives teachers a strong knowledge base to work from as they develop and deliver the curriculum.

Second, teachers must personalize the knowledge they have acquired about AODA and prevention. If teachers expect students to think reflectively about AODA and use that new understanding to modify their behavior, teachers also must be willing to complete that process for themselves. Appendix I lists teacher outcomes that contribute to teachers' deeper understanding of the fundamental principles and related content areas. The way in which teachers resolve these outcome questions has a major influence in how they structure and deliver AODA lessons. Without working through this process, teachers filter (often unconsciously) AODA knowledge through their personal perspectives, which may make delivery of content less consistent among teachers, subjects, and grades. As with the student outcomes, resolving teacher outcome questions helps teachers become aware of the impact their personal perspective has on AODA instruction. This then provides the AODA coordinator with a process to bring the entire K-12 teaching staff involved in AODA education to a more common understanding of the fundamental principles, content areas, and student outcomes.

If teachers expect students to think reflectively about AODA and use that new understanding to modify their behavior, teachers also must be willing to complete that process for themselves.

Finally, if teachers are to adequately teach for self-reflection and deep understanding of AODA issues, some staff members may need to learn new teaching strategies. Techniques that teach for thinking and about thinking as well as the teaching of thinking must be taught to teachers if they are to be purposefully included in classroom instruction. Appendix J provides some background reading in this topic. Teachers without experience in these strategies will need additional professional development.

The teacher training plan may span the course of multiple school years, depending on teachers' previous knowledge.

Materials

(Some curriculum) packages approach personal, interpersonal, and social system competencies from an information-only basis and evaluate students on mastery of facts.

Acquisition of materials is an issue for all districts. It is relevant whether revising existing curricula, creating new curricula, or purchasing packaged curricula.

If a district chooses to purchase a curriculum package, it is essential to carefully review the package before purchase. Some materials promoted as AODA curriculum may include only life skills and require significant adaptation to add AODA-specific objectives. Other packages approach personal, interpersonal, and social system competencies from an information-only basis and evaluate students on mastery of facts. Appendix K provides some ideas to consider when reviewing AODA curriculum materials.

Purchased curriculum materials also may need to be adapted to the local community's specific needs. Too often, packaged programs are implemented and later found to be irrelevant to local conditions. Careful preview before purchase and careful adaptation before use will help districts avoid this situation. If time is not available initially to adapt the curriculum, start with the package as it exists, and plan for adaptations as soon as possible. Appendixes L, M, and N provide information and checklists to use to review AODA curricula for bias. Appendix O helps educators neutralize biased or sexist materials.

Writing a curriculum is a viable option for districts. Locally developed curricula require a greater amount of time and expertise on behalf of staff members but produce a greater sense of local ownership and include teachers' professional development.

A curriculum's message and content are two of its most important features. Consider the following when making a selection:

- philosophy
- appropriate and clearly defined goals and objectives
- longevity
- flexibility and adaptability to a variety of teaching styles
- completeness, timelines, and accuracy of materials
- equity and diversity
- possibility for integration into subject areas
- cost effectiveness
- quality of learning it promotes for students
- content that helps students understand the four fundamental principles of the Wisconsin AODA Curriculum Model

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Delivery

When effective classroom teachers deliver AODA instruction, they address three levels of learning: knowledge, action, and assimilation. When all three levels are addressed, classroom activities promote student interaction, conceptual understanding of prevention principles, self-reflection, and prevention attitude and skill development. To adequately accomplish assimilation, both knowlege- and action-centered learning are required.

Knowledge-Centered Learning

Instructional strategies that are knowledge or information centered emphasize recall and awareness levels of learning. Students are made aware of concepts, but they are not made aware of their personal concepts (which may be naive or misunderstandings) and are not provided opportunities to develop conceptual understanding.

In knowledge-centered learning, the teacher (or guest speakers, readings, videotapes, and so forth) presents the information to students, and students are assessed on their attentiveness during the delivery, their recall of information, and their completion of assignments (such as worksheets and recall questions).

While these teaching techniques are sometimes criticized for not promoting thinking by students, they do have a role in AODA education if the information is combined with time for students to develop conceptual understanding. These techniques are most effective when the teacher has specific information to deliver and when that information is further developed with other strategies and activities.

The danger of overutilizing these strategies is that they permit minimal amount of student involvement and they imply the assumption that adequate knowledge is enough to influence behavior.

It is important for teachers to critically examine their classroom lessons to determine to what extent they are information and knowledge centered (See Appendix P). Classrooms that place great emphasis on acquisition of information share many of the following characteristics:

- a high degree of structure controlled by the teacher
- the majority of the information is delivered by the teacher to the student
- there is an emphasis on factual material, memorization, recall, and repitition
- learning is centered in the classroom
- evaluation of student learning measures what knowledge the students can recall

Action-Centered Learning

Instructional strategies that are action centered emphasize doing—"minds on," "hands on," or both. As in knowledge-centered learning, the teacher provides the structure for the classroom. However, in action-centered learning, the students structure the outcomes of the learning because they must use their own existing concepts, attitudes, and skills as well as the new ones the teacher initially introduced to them or made them aware of during the knowledge-centered learning.

Wise teachers use action-centered learning to assess students' existing knowledge of concepts, attitudes, and skills. With this information, teachers reassess their lesson plans. They may need to go back and again introduce the new concepts (knowledge-centered learning) but this time focusing on common misunderstandings, hindering attitudes, and weak skills.

In action-centered learning, the students structure the outcomes of the learning because they must use their own existing concepts, attitudes, and skills as well as the new ones the teacher initially introduced to them or made them aware of during the knowledge-centered learning.

Teachers may consider the following characteristics to determine whether their teaching strategies are action centered (see Appendix P):

- activities are under the direction of the teacher
- students are using knowledge in a predetermined, and often structured way, even during role play, discussion, rehearsal, and simulation
- the information that students are taking action with is information imparted by the teacher to the student
- the majority of activities take place in the classroom
- the teacher has specific expectations for all students regarding the type of actions students will take with the information
- evaluation is based on a blend of accurate recall of information and the students' ability to complete activities to the standard established by the teacher

Action-centered learning is an appropriate part of AODA instruction in that it provides students with an opportunity to become involved in working with AODA information. Likewise, through structured activities, the teacher may check for student understanding of basic concepts and intervene to clarify misunderstandings. Appropriately structured classroom activities provide essential preparation and practice for students before they are able to do assimilation learning activities.

Learning for Assimilation

When assimilation of AODA information and skills is emphasized, the learning activities are highly student centered. Based on careful teacher direction, students engage in self-reflection to determine their existing knowledge of lesson content, and later, to what extent they have incorporated new AODA prevention information and skills into their daily lives.

Obviously, the specific information and skills the student is able to assimilate cannot be dictated by the teacher. The teacher's role is to support the student in this process, structure self-reflection and critical-analysis opportunities, link students to other students at similar stages of assimilation, and clarify misunderstandings.

Obviously, the specific information and skills the student is able to assimilate cannot be dictated by the teacher. The teacher's role is to support the student in this process, structure self-reflection and critical-analysis opportunities, link students to other students at similar stages of assimilation, and clarify misunderstandings. Specific activities to accomplish this include student journals and portfolios, examples of assimilation from everyday life experiences, goal setting, and reflective discussions and interviews between the teacher and student or among students (see Appendix P).

The following characteristics may be used to determine the extent to which learning activities are promoting assimilation:

- careful planning by the teacher so there is time for all students to talk about what they are learning and how they are using it
- activities that are centered on students communicating what they are learning about prevention information, attitudes, and skills and providing examples of ways they are attempting to use their learning in their daily lives
- limited focus on facts and memorization
- validation of the importance of student experiences
- the student is allowed to discover new ideas and linkages not presented by the teacher
- self-reflection by teachers and students is required

- expectations, goals, and experiences are unique among individual students
- activities take place over a long period of time rather than during one class period or unit
- the teacher includes higher-level questions in discussions with students
- evaluation includes real-life incorporation of skills and information
- careful observation of oneself and others in daily life, noticing existing conceptions, views, attitudes, and skills that may be helpful or harmful
- asking intriguing questions
- bringing up relevant issues
- noticing discrepancies
- applying ideas to everyday life

Assimilation of curriculum concepts is a major goal of teachers of AODA issues. It is important to remember that traditional teaching techniques do not always adequately help students accomplish assimilation in a genuine manner.

Evaluation

Evaluation in the curriculum component occurs on many levels. It is important that the team sharing responsibility for curriculum implementation adequately plans for these various levels of evaluation.

Adequate mastery of student outcomes is more complex than averaging test scores, it requires teachers to observe for specific knowledge, attitudes, and skills that are broad enough to encompass individual differences among students.

Outcome Evaluation

Outcome evaluation assesses the extent to which curriculum objectives or outcomes are met by students. Adequate mastery of student outcomes is more complex than averaging test scores, it requires teachers to observe for specific knowledge, attitudes, and skills that are broad enough to encompass individual differences among students. Students demonstrate appropriate knowledge, attitudes, and/or skills relative to each outcome. The outcomes detailed in Chapter 2 are written as questions. This implies that students, in their AODA lessons and in daily life, are communicating what they understand and providing examples of their own practice throughout the school year. Classroom teachers, therefore, must determine what constitutes adequate demonstrations by students. In establishing such criteria, it is important that teachers include criteria beyond recall of information if they are teaching for assimilation of AODA information and skills.

For example, criteria for the student outcome "Who can help me when I'm feeling bad or confused?" in the K-1 grade-level group, may include the following:

- trusted school staff members, such as a guidance counselor
- a trusted adult in the home, parent(s), guardian(s), grandparent(s), babysitters, or neighbors
- to a lesser degree, community resources, such as doctors, nurses, police officers, and religious leaders
- older siblings

- examples of the criteria the student uses to distinguish between a helpful person and a unhelpful person
- examples students give (tell stories) about misconceptions or people they thought could help them, but based on their established criteria may need to be considered before being labeled helpful

The constructivist view of learning has associated with it the view that "less is more."

The way students address this outcome may vary, but it must be rational enough to reduce the risk of children trusting unreliable people.

The methods available to students for demonstrating their understanding of outcomes should be as varied as the students' individual learning and communication styles. Some children are excellent writers, others communicate most effectively verbally, others may want to create an illustrative story or play. The communication methods available to students and teacher expectations need to be varied and age appropriate.

Outcome evaluation also occurs during instruction. It is possible to discuss the elements of instruction in terms of planning for teaching, preparing students for learning, processing the new knowledge, consolidating the learning, and evaluating the learning. Evaluation is used for various purposes and throughout these steps rather than only at the end. Evaluation during instruction may indicate the need to return to the learning process or the preparation for learning. Evaluation may change the planning that the teacher does for the next learning outcome, or evaluation could be used to assign grades (see Appendix Q). In the long run the goal is for the students to become interested in, capable of doing, and committed to the importance of self-evaluation. The elements of instruction are based equally on attention to prior knowledge and the new learning—in the long run, learning to be a self-directed learner; and in the short run, to use what is being learned in one's daily life situations. It is important to remember, that the constructivist view of learning has associated with it the view that "less is more." This refers to the belief that students benefit most from instruction that values learning only a few things, like the four AODA principles, but learning them in depth and complexity as they apply to daily life.

Students benefit most from instruction that values learning only a few things, like the four AODA principles, but learning them in depth and complexity as they apply to daily life.

Process Evaluation

Process evaluation provides a record of costs—human, material, and financial—that were accessed to implement the AODA curriculum. Accurate and complete records of the numbers of teachers and students participating, money allocated, and materials ordered provide the district with a clear picture of what material resources were needed to implement the curriculum. These are often of primary concern to school board members and administrators who must justify educational expenses to the community.

Efficiency Evaluation

Efficiency evaluation takes into consideration the findings of both previous evaluation efforts: outcome and process. No educator would judge the value of a curriculum solely by its price tag. Efficiency evaluation allows the district to judge the curriculum's quality based on what students were able to learn for the implementation effort required. If the district expended

many resources for minimal accomplishments, staff members may want to reconsider their approach. Since many factors influence outcome, it is wise to do efficiency evaluation over a period of time to establish long-term trends.

Impact Evaluation

Impact evaluation looks at the bigger picture of all AODA prevention and intervention efforts in the school and community and their impact on the quality of health in the entire community. Because this form of evaluation is not specific to one program component such as curriculum, it will not be discussed in detail. For further information, see *Alcohol and Other Drug Abuse Programs: A Resource and Planning Guide* (DPI, 1991).

Summary

Information gathered through evaluation provides the impetus for the cyclical nature of curriculum implementation. Some view curriculum as having a beginning (comprehensive implementation strategy) and an end (evaluation), implying that at some point the district will be "done" implementing AODA curriculum. An alternative view sees curriculum implementation as a continuous process where content, methods, and focus are constantly rethought based on evaluation data gathered and new information available related to the subject matter. This view helps ensure that the AODA curriculum is not a publication on a shelf, but a living plan of instruction that is flexible enough to adapt to emerging issues, new information, and diverse populations.

AODA curriculum is not a publication on a shelf, but a living plan of instruction that is flexible enough to adapt to emerging issues, new information, and diverse populations.

Integration

Among AODA Programs
With Other School Programs
Within the Community
Summary

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Classroom AODA instruction is most likely a student's first exposure to the district's comprehensive AODA program. In some cases, it may be the only component a student will experience.

The foundation of a comprehensive K-12 AODA program is its curriculum. No other component will touch every student at every grade level. Classroom AODA instruction is most likely a student's first exposure to the district's comprehensive AODA program. In some cases, it may be the only component a student will experience.

In view of these facts, it is critical that curriculum implementation and integration occur in a well-reasoned manner. AODA curriculum integration cannot happen by accident, it is the product of thought and planning. The AODA instructional program is carefully integrated on three levels: among AODA programs, with other school programs, and within the community.

Among AODA Programs

Since curriculum is the foundation of a comprehensive AODA program, it is a logical place for districts to begin when developing a K-12 program. Before expanding or initiating other student programs (such as alternative activities) the K-12 AODA curriculum should be as complete as possible. Once an AODA curriculum has been adopted in accordance with the district's philosophy, all other program components may need to be re-evaluated for consistency with the curriculum.

Philosophy/Policy

Ideally, the district's instructional program mirrors its philosophy on alcohol and other drug abuse by youths and remains consistent at all grade levels. In this way, students receive congruous messages throughout the educational system rather than a no-use message K-8 and responsible use in grades 9-12. This consistency sends a strong message to students that the district is united in its efforts and firm in its position of no-use.

District policies also must reflect district philosophy. Consistent implementation of no-use policies are severely undermined if school staff members do not take action when student use of alcohol or other drugs is discovered. Inconsistency between adults' words and actions gives youths justification for discounting the information about alcohol and other drugs that adults provide. Therefore, the district's philosophy and policies are strongest when all school staff members understand them, communicate them, and act consistently. To do otherwise weakens the effectiveness of AODA prevention and intervention programs.

Peer Programs

Student training is a basic component of peer programs. What often is not considered, however, is that the K-12 AODA curriculum also is a basic training program for students. Peer program trainings enhance what is already being taught and practiced in the classroom. If the AODA curriculum is thorough, all students are learning positive communication, self-awareness, refusal, decision-making, and conflict-resolution skills along with accurate AODA information. District coordinators who clearly under-

stand the classroom AODA curriculum are better able to choose trainers who will build on what the students have begun to learn in a sequential AODA curriculum. A well-planned training program helps keep students from becoming disinterested or bored by training information. Likewise, properly selected trainings are able to take students to a deeper level of self-understanding and understanding of others than is possible in the classroom.

Student Assistance Programs

Staff members planning Student Assistance Program (SAP) activities, must be aware of the classroom AODA curriculum provided for students. The SAP curriculum, as with peer training, should build on what students are learning about alcohol and other drugs in class. Rather than repeating information and activities, group facilitators familiar with the district's AODA curriculum are able to design group activities that build on the students' base of AODA knowledge from the classroom.

Parent Programs

The AODA curriculum should be reflected in the district's programs for parents and guardians. Little will be accomplished by parent education programs that are inconsistent with what children are learning in the classroom. As stated in Chapter 2, a goal of AODA instruction is to influence student behaviors and prevent alcohol and other drug use. Realistically, this is unlikely to happen without reinforcement in the home. Therefore, parent programs are structured to help parents learn content and skills similar to those included in the K-12 AODA education program. Parents need basic AODA information and techniques to foster the personal, interpersonal, and social system competencies their children learn at school. They also must understand and accept the four fundamental principles underlying the AODA curriculum. This has several implications for AODA program developers.

(Parents) also must understand and accept the four fundamental principles underlying the AODA curriculum.

- Parents play an important role in AODA curriculum development. If concepts and skills are offensive or controversial to most parents, the AODA curriculum (and potentially the entire AODA program) is in jeopardy. Including parents on the AODA advisory committee and gaining the support of religious and other community leaders help avoid this.
- AODA lessons should incorporate parent or guardian involvement. Ideally, as students are developing personal, interpersonal, and social system skills, parents or guardians are utilized to document improved skills in their children. This may be accomplished through family discussion assignments related to AODA topics or parent feedback on student demonstration of essential skills.
- Parent programs must be viewed as a continuation and support of the parents' involvement in their children's AODA education. Thus, the program's content is based on the district's AODA curriculum, with goals and outcomes for parent education mirroring those of the student program (see Appendix R). Therefore, strategies ask parents to reflect on their own experiences and acknowledge that parents have prior knowledge about AODA.

- Parent programs need a logical sequence. The district must establish a scope and sequence of parent programming just as it establishes a scope and sequence for student AODA education. The goals or desired outcomes of the parent component need to be identified and a series of programs developed to meet those outcomes. This thoughtful approach replaces isolated and potentially useless programs with parent programs that are designed to have a cumulative effect.
- The child's family members may not model a prevention or no-use focus, and thus the curriculum is in direct opposition to family norms. It is best to deal with this inconsistency openly, not to criticize it but to acknowledge the potential difficulties it causes.

In summary, a well-integrated comprehensive AODA program has a method to its development. Each person in a leadership role understands the importance of his or her component to the whole program. In the case of curriculum, the curriculum developers and instructors understand the fundamental importance of sequential AODA instruction to the success of other program components and the entire comprehensive program.

With Other School Programs

Valuing the health and personal well-being of each student is most effective when it is a shared, schoolwide ethic.

AODA instruction that is taught in isolation is ineffective, time consuming, and often neglected. Valuing the health and personal well-being of each student is most effective when it is a shared, schoolwide ethic. When this occurs, it is practical and possible to infuse AODA information and related skills into various subject areas.

The term infusion is used to describe the process of blending AODA concepts with existing subject-area content. Infusion takes different forms in various school districts. When done well, infusion not only lends strength to the curriculum message but increases districtwide ownership of the AODA curriculum component of a comprehensive program.

As discussed in Chapter 3 of *Alcohol and Other Drug Abuse Programs: A Resource and Planning Guide* (DPI, 1991), there are some subject areas that easily lend themselves to infusion. These include

- health education
- developmental guidance
- social studies
- English
- driver's education
- family and consumer education
- mathematics
- science
- physical education

However, any subject area has the potential to teach toward the student outcomes detailed in Chapter 2. Figure 5 illustrates content areas that have potential for AODA infusion. Chapter 4—Implementation—outlines a process for assessing the district's existing curriculum. That assessment process yields a picture of the infusion already accomplished K-12. It also may give some ideas for logical infusion areas yet to be accessed.

Grades	Influences on AODA Conceptualization
K-1	A. What have I learned, in and out of school, about alcohol and other drug abuse (AODA)? B. Where and how has this AODA information been learned? C. What are my words and actions teaching others about alcohol and other drugs?
Potential Integration Areas:	**• Health • Developmental Guidance • Social Studies • Art • Language Arts**
2-4	A. What new ideas am I learning about alcohol and other drug abuse? B. Where and how has this new AODA information been learned? C. What beliefs about alcohol and other drug abuse do I hold that might be biased or stereotyped? D. How do my beliefs about AODA and my sources of AODA information compare to those I held in earlier grades? E. What are my words and actions teaching others about alcohol and other drugs? F. How do my words and actions concerning alcohol and other drug abuse compare with what others are teaching me? G. What is peer pressure? What distinguishes good pressure from bad pressure? H. Can peer pressure be both good and bad at the same time? Explain. I. How do I use peer pressure to my advantage? J. How does my use of peer pressure affect others? K. How much of what I learned about alcohol and other drugs in earlier grades do I use in my everyday life?
Potential Integration Areas:	**All of the above, plus: • Reading**
5-8	A. What are my beliefs and attitudes about alcohol and other drugs? B. What are my most valued sources of AODA information and influence? C. Are my beliefs, including stereotypes and biases, enabling me and others to deny or see the truth about AODA? D. How do my beliefs, including stereotypes and biases, influence my behavior regarding alcohol and other drugs? E. For whom am I a valued source of AODA information and influence? F. What are my least valued sources of AODA information and influence? G. What is my criteria for deciding to believe or reject AODA information? H. How much has what I already have learned about alcohol and other drugs influenced my behavior and attitudes regarding AODA?
Potential Integration Areas:	**All of the above, plus: • Speech • Foreign Language • Family and Consumer Education**
9-12	A. What current economic, cultural, and social factors promote alcohol and other drug abuse? B. To what extent have tobacco, alcohol, and other drugs permeated my culture and community? C. How has this permeation of tobacco, alcohol, and other drugs influenced the way I demonstrate that I am becoming more adult? D. What concept of adulthood are others demonstrating for me? E. What concept of adulthood am I demonstrating for others? F. How does my use or nonuse of alcohol and other drugs enhance or detract from my sense of self-worth, sexuality, and gender identity? G. How do my family's and friends' views and practices regarding alcohol and other drugs affect my behavior? H. What stages has my thinking gone through since kindergarten regarding alcohol and other drugs?
Potential Integration Areas:	**All of the above, plus: • History • Economics • Drama • Psychology • Music • English • Driver's Education**

Effects of Alcohol and Other Drug Abuse

A. What are the similarities and differences among food, medicines, drugs, and poisons based on their effects and the conditions in which they are used?
B. How do I decide which foods, medicines, drugs, and poisons are good or bad for me?
C. What are examples of the effects of foods, medicines, drugs, and poisons that can be immediately seen or happen more slowly over time (visible and invisible effects)?

• Health • Developmental Guidance • Art • Science

A. How do alcohol and other drugs affect the mind and body?
B. How do I distinguish between positive, negative, or mixed effects of alcohol and other drugs?
C. When might the bad effects of alcohol and other drugs seem good to a person?
D. What are alternative ways to feel good without using alcohol and other drugs?

All of the above, plus: • Physical Education • Social Studies

A. How has other people's use of alcohol and other drugs affected me?
B. What new AODA effects am I aware of now that I am older?
C. How are effects of alcohol and other drugs on mind and body related to individual differences (such as age, weight, or gender)?
D. How does alcohol and other drug abuse affect family and peer relationships?
E. What impact has AODA had on our school and community?
F. What effect has AODA had on the activities my friends and I do together?
G. What effects of alcohol and other drugs signal misuse, abuse, or dependency?

All of the above, plus: • Speech • Math • Family and Consumer Education

A. How do parents' choices regarding alcohol and other drugs affect their children?
B. How does a person's alcohol and other drug use affect others? Misuse? Abuse? Nonuse?
C. How does alcohol and other drug nonuse, use, misuse, and abuse affect a person's style of thinking or ability to think?
D. How are these effects on thinking addressed in treatment and recovery?
E. How do effects of alcohol and other drugs on the mind and body change if drugs are combined with one another or with other substances?
F. What effect has AODA had on our city, state, nation, and world?

All of the above, plus: • History • Economics • English • Music • Drama • Science • Psychology • Business Educ. • Agriculture • Technical Educ. • Driver's Educ.

Rules About Alcohol and Other Drugs

A. What rules exist for me regarding foods, medicines, drugs, and poisons?
B. How did I learn these rules? Do I follow them?
C. Do all families and individuals have the same rules about foods, medicines, drugs, and poisons? Explain.
D. Why do rules exist about foods, medicines, drugs, and poisons?

• Health •Developmental Guidance • Social Studies • Language Arts • Art

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A. What are similarities and differences iules set by me, my family, my school, and my community regarding alcohol and other drugs?
B. Do I keep these rules in all circumstances? Explain.
C. Why are some rules about alcohol and other drugs broken?
D. What are consequences of breaking rules related to alcohol and other drugs?
E. Is it ever right to break a rule? Why do rules exist if people can and do break them?
F. Why can I hold healthy beliefs and accurate knowledge about AODA and yet fail to follow rules?

All of the above.

A. What criteria do I use to label rules (including AODA rules) as fair or unfair?
B. How do labels influence my ability to follow rules?
C. How do consequences for breaking specific AODA rules change as people get older?
D. How might alcohol and other drugs affect my ability to follow the rules my family, friends, school, and community have set for me?
E. How might alcohol and other drugs affect my ability to follow the rules I have set for myself?
F. What changes are occurring in the rules that my peers, family, school, and community set for me concerning alcohol and other drugs?
G. How do my rules concerning alcohol and other drugs compare with rules for these substances in other cultures and communities?
H. How do my internal rules differ regarding tobacco, alcohol, and illegal drugs?
I. What are some spoken and unspoken rules regarding tobacco, alcohol, and other drugs?
J. Are all rules about alcohol and other drugs consistent among situations, people, and groups? Explain.

All of the above, plus: • Speech • Foreign Language • Physical Education • Family and Consumer Education

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A. What process do I now use to set rules for myself concerning alcohol and other drugs?
B. How does this process compare with the way I established rules for myself when I was younger?
C. Do my rules about alcohol and other drugs allow me to make positive choices for myself?
D. Do my rules about alcohol and other drugs affect others positively, negatively, or in a mixed way?
E. What are my internalized rules for alcohol and other drugs?
F. How do these rules compare with previous rules and with external rules?
G. What is the basis of the school's, community's, and society's thinking that generated current laws and policies related to alcohol and other drugs?
H. How can a person differentiate norms from rules and laws related to alcohol and other drugs?
I. What are the implications for myself and others if the majority of people in society choose to ignore rules and laws related to alcohol and other drugs?
J. What are the legal consequences for me of ignoring rules and laws related to alcohol and other drugs?
K. What are justifiable criteria for judging the fairness of rules, laws, policies, and norms related to alcohol and other drugs?
L. If rules, laws, policies, and norms related to alcohol and other drugs are proven unfair, what is the appropriate response for individuals and society?

All of the above, plus: • History • Economics • English • Music • Drama • Science • Psychology • Business Educ. • Agriculture • Technical Educ. • Driver's Educ.

Figure 5 — Integration

Keeping Safe From Alcohol & Other Drug Abuse

A. What feelings do I have that I label as good, bad, or mixed?
B. Who can help me when I'm feeling bad or confused?
C. What do I know and what do I do to keep myself safe and healthy?

• Health •Developmental Guidance • Art • Science

A. What is a risk?
B. What criteria do I use to label the risks I take as positive or negative?
C. How do I keep myself safe and ahealthy and still take risks?
D. What personal skills do I have or need to develop to stay away from unsafe risks?
E. What are my personal traits that make it difficult for me to stay safe and healthy?
F. What people, programs, and organizations in my school and community help people who have AODA-related problems?

All of the above, plus: • Physical Education • Social Studies

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A. What skills and attitudes am I practicing to keep myself safe and help others to keep safe from AODA?
B. What myths about AODA risks are promoted culturally? By my peers? By me?
C. What groups, individuals, or organizations can help me assess my risk or others' risk for AODA?
D. What is the danger in denying personal risks for AODA?
E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?
F. How do alcohol and other drugs affect my ability to keep myself and others safe and healthy?
G. What responsibility to others do I have to make safe choices about alcohol and other drugs?
H. What social systems exist to
   - develop positive skills and attitudes in citizens?
   - help those with AODA-related problems?
   - intervene with problems?

All of the above, plus: • Speech • Math • Family and Consumer Education

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A. What skills and attitudes have I developed that help keep me and others safe and healthy in relation to AODA?
B. How consistently do I apply these skills and attitudes in AODA-related situations?
C. What kind of support do I need to help me consistently use these skills and attitudes?
D. How have my skills and attitudes improved as I've gotten older?
E. How do these skills and attitudes affect my risk of
   - becoming infected with the human immunodeficiency virus (HIV) or other sexually transmitted diseases?
   - having a child with fetal alcohol syndrome?
   - becoming a victim or perpetrator of sexual violence?
   - being involved in an unplanned pregnancy?
   - dropping out of school?
   - breaking the law?
F. How can I foster positive skills and attitudes in others?
G. How can I become involved in the social systems that exist to
   - develop positive skills and attitudes in citizens?
   - help those with AODA-related problems?
H. How can I become an advocate for AODA programs in my school and community?

All of the above, plus: • English • Drama • Science • Psychology • Agriculture • Business Educ. • Technical Educ. • Driver's Educ.

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When infusion occurs, AODA concepts are a vehicle for teaching regular education content, and student objectives include both AODA-specific outcomes and outcomes related to the subject area. Where infusion does not occur, AODA concepts are taught separately from the regular education content and apart from regular classroom objectives.

Contrasting Instructional Methods

The following scenarios illustrate contrasting methods for delivering AODA instruction. Method One is an AODA-specific lesson that the teacher does not infuse into the subject area. The lesson could be delivered in any classroom and has little or no ties to the regular education subject area—in this case science—through which it is delivered. Method Two, however, takes many of the same concepts and blends them into science lessons.

Where infusion does not occur, AODA concepts are taught separately from the regular education content and apart from regular classroom objectives.

Method One

As a part of a unit on alcohol and other drugs, a high school biology teacher introduces a lesson on blood-alcohol concentration (BAC) by explaining three levels of intoxication: affected (.01 to .04 percent BAC), impaired (.05 to .09 percent BAC), and intoxicated (.10 percent BAC). Based on this information, students in small groups generate definitions of BAC. The teacher explains that BAC is influenced by the amount of alcohol consumed, the period of time during which the alcohol was consumed, and the person's body weight.

Class members then discuss various myths that people hold concerning ways to control impairment. In a subsequent class, students are shown the breathalyzer test by a local law enforcement officer who explains how the machine works and is utilized by law enforcement agencies.

Method Two

Throughout units on electricity, chemical changes, and light balance technology, a high school science teacher uses the breathalyzer to illustrate how scientific concepts are manifested in a real-life situation. Over the course of several weeks, as these units unfold, the operations of the breathalyzer are used as examples of scientific principles. Specific student activities include interpreting the internal workings of the breathalyzer, identifying the scientific concepts involved in its functioning, and laboratory experiments further clarifying scientific concepts such as chemical reactions, atomic structure, and standardization.

As a final evaluation, students are assigned the task of creating a model breathalyzer from materials they find at home and in school. Breathalyzer models are evaluated based on how accurately the model mirrors the way a real breathalyzer works and the clarity with which the student is able to explain the model's operation.

Class discussion, debate, and research of the following questions explore the social context of the need for and appropriateness of the breathalyzer as a resource for law enforcement.

- From a scientific perspective, what potential problems do you see in the use of the breathalyzer?
- What might be some ways to eliminate these problems?
- From a scientific and legal perspective, what are the strengths of using a breathalyzer?
- In what other ways has science been used to intervene in AODA problems?

Characteristics of Instructional Methods

In comparing and contrasting these two methods of instruction, the following characteristics of each method are evident.

Method One

- treats AODA issues as a unit separate from other science-based units
- does not interrelate science concepts and AODA concepts
- could be taught in exactly the same way in any class
- has only AODA-specific student objectives

Method Two

- uses AODA concepts to also teach science concepts
- blends AODA concepts across many science units
- teaches an AODA concept in a way that is applicable specifically to a science curriculum
- has student objectives teach toward both science and AODA outcomes

Infusion requires more than inserting one or two lessons into an existing curriculum.

From these examples it is clear that infusion requires more than inserting one or two lessons into an existing curriculum. To infuse AODA instruction into an existing content area the classroom teacher

- attends AODA training programs to learn the basic concepts and principles involved in AODA and its related problems,
- attends inservices by AODA staff members about the student outcomes the district utilizes for student assessment of K-12 AODA instruction,
- has an opportunity to work with other teachers who provide AODA instruction to learn more about existing AODA lessons and teaching techniques,
- has opportunities to meet with other science teachers in the district to discuss how AODA concepts and outcomes are related to science concepts and outcomes,
- is provided with time to develop new lessons that blend AODA and science concepts, and
- is provided with adequate funds to purchase or update instructional materials to deliver the new lessons.

Within the Community

The power of cultural norms in influencing behavior, about alcohol use for example, has long been acknowledged. Therefore, integration of AODA curriculum within the community is essential. When the community understands the curriculum's competencies and outcomes, it is an important first step toward support and reinforcement of district philosophy. Integration within the community is achieved by

- involving community representatives in curriculum selection, development, training, and delivery. Community representatives are chosen carefully to obtain valuable input from a variety of sources. The curriculum will be delivered to students of various ages, abilities, and cultures. With conscious attention, instructional methods and course content are meaningful to all rather than meaningful to the majority. Sometimes the school staff members that select or develop AODA curriculum are not representative of community demographics. To increase effectiveness, special effort must be made to include representatives of all groups and incorporate their suggestions. Appendix Y lists various resources for educators to utilize to broaden their understanding of various groups that may be present in the school district or surrounding area.

The curriculum will be delivered to students of various ages, abilities, and cultures. With conscious attention, instructional methods and course content are meaningful to all rather than meaningful to the majority.

- keeping the community informed. Most school districts and some AODA programs publish newsletters. Nearly every district publishes current district events in local newspapers. These existing channels may be utilized to inform the community of the district's AODA education program. Such "advertising" promotes the benefits of AODA instruction and creates an awareness of the school district's proactive position concerning AODA.
- utilizing community experts as guest speakers. Many county social service agencies use block grant funds to employ prevention specialists. These specialists, as well as other AODA-related professionals, are excellent resources. They can speak of AODA-related career opportunities or inform students of their agency's role in AODA prevention and intervention.
- promoting community awareness programs that emphasize concepts and goals consistent with the AODA curriculum. Community groups such as city councils, service agencies, and churches often are interested in learning more about alcohol and other drug abuse. If the school district is tapped as a resource for these programs, it is an excellent opportunity to help adult community leaders understand the student goals the district is hoping to accomplish with AODA instruction. Some school districts schedule regular visits to community agency meetings to update the members about district AODA initiatives. Whenever possible, a school district takes the opportunity to initiate thoughtful dialogue with community leaders about alcohol and other drug abuse and the influence community leaders have as role models.

Schools are not the only community agency concerned with promoting the health and well-being of youths. They share a concern and responsibility for youths with all community members.

Summary

Schools are not the only community agency concerned with promoting the health and well-being of youths. They share a concern and responsibility for youths with all community members. These community groups are some of a school district's strongest potential resources. Once a resource is accessed, the AODA program is enhanced in a way that is not possible when a school district works in isolation.

Appendixes

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Appendix A

Hints on How to Conduct Simulations

Adapted and reprinted with permission from *Logical Reasoning in Science and Technology, Teacher's Guide*. Glen Aikenhead, Rexdale, Ontario: John Wiley and Sons Limited, 1991, pp. 97-98.

Simulations are characterized by role playing in artificial situations. Good simulations involve students in situations that allow them to stretch their thinking capabilities, explore different points of view, and apply their knowledge to lifelike situations or decisions. Simulations encompass a broad range of approaches. Role playing demands active learning. Thus, simulations do much more than simply motivate students.

Students' preparation and presentation take class time. The educational advantages to role playing make the time investment worthwhile, as long as the time is spent efficiently. Consequently, you should set time limits and, within reason, keep to them. Students will always want more time to prepare their case. Give them reasonable class time (so you can assist them) and schedule the simulations so students can spend extra time outside the class if they wish.

Well-run simulations are

- structured so students know exactly what their roles are and what the objectives are (role cards for each student can be helpful);
- well-prepared by students so they do not rely on creative spontaneity, but rather on carefully thought-out presentations (small group configurations are often used in preparing for a simulation);
- organized so the classroom furniture reflects the situation (for example, a courtroom);
- led by a strong personality, usually you, who ensures that the class keeps to the simulations at all times (for example, the judge in a court case or a senator as chair of an inquiry);
- organized with a sensitivity to individual students and to the positive and negative consequences that would ensue from students playing various roles;
- organized so that there are backup students ready to take over in case of absences, and who are ready to give psychological support to the main players;
- held after students have had sufficient time to prepare and rehearse;
- structured to encourage students to do extra preparation research and to use props; and
- followed by a **debriefing session** in which the class discusses the main points brought up in the simulation, and you summarize these important ideas. (Making notes on the board may be useful sometimes.) A debriefing session with students out of their simulation roles can make a very effective student-centered class discussion. The debriefing session can be the most productive aspect of some simulations. The active participation of students in the role playing naturally leads to their highly motivated, intellectual participation in a debriefing discussion. Discussion questions are sometimes assigned to students ahead of time, in order to improve the quality of the simulation's debriefing session. Other times, simulations need only a short teacher-centered debriefing session.

It takes practice before students become proficient at role playing. Thus, the first efforts are often halting presentations because of incomplete student preparation or student shyness. The patient teacher, however, is rewarded with high-quality role playing by students who learn from these early attempts.

Active learning in a simulation appears more chaotic than passive learning. However, class discipline problems actually decrease in simulations, provided that you ensure that on-task behavior is causing the "chaos." The noisiest simulations are sometimes the most productive.

Occasionally a teacher will have a class of students who have the talent to write and produce their own simulation or mini-play. Inspired by an idea or event in a science unit (for example, uranium mining), students would be expected to research their script in order to portray informative and authentic positions. Producing satirical commercials is much more light-hearted. If possible, videotape the productions to show at a school event.

Appendix B

Hints on How to Conduct Student-Centered Class Discussions

Adapted and reprinted with permission from *Logical Reasoning in Science and Technology, Teacher's Guide*. Glen Aikenhead, Rexdale, Ontario: John Wiley and Sons Limited, 1991, pp. 39-40.

Student-centered class discussions are characterized by the predominance of student-student verbal interaction; that is, the sequence of speakers is comprised mostly of students. Your role is to probe students for their understanding, perceptions, and reasons (not your "correct" answers) and to encourage students to interact, for instance, by getting them to analyze what was said critically (for example, "Do you accept what Ken just said, Jean?"), or by posing questions that channel the discussion along a fruitful path (for example, "Will that reason always apply?"). What emerges from a student-centered discussion is (1) a class understanding of the various points brought out and developed by the class and (2) the reasoning that supports those points. You end the discussion by summarizing the ideas that developed in the discussion, using the students' language as much as appropriate. There may not be one right answer, but there must be well-reasoned conclusions.

The fact that the reasoned conclusions emerge from a class discussion does not mean that students already knew the answer. The class constructs a conclusion themselves, out of their previous ideas and present analysis.

Students should be expected to take notes during some discussions. You can help by jotting notes on the chalkboard or on the overhead projector (this will help prevent you from joining in the discussion to show students how much you know). The most difficult task for the teacher in a discussion is to keep quiet. Perhaps it might help to remember what an ancient sage said: "He who does the talking does the learning." That is the basic psychology behind a student-centered class discussion.

Of course, the class must be properly prepared to talk about something worthwhile. High school students rarely have enough general knowledge to make discussions fruitful. Therefore, students must prepare for a discussion. Instead of treating the textbook questions as homework to hand in, you can assign the questions as preparation for a class discussion. Have students jot down their thoughts, and then hold a class discussion to arrive at a class consensus on an appropriate answer. Thus, the homework is the preparation for the discussion, and the students' tentative answers become the central focus of the discussion. Students should pool their ideas and critically analyze them before reaching a consensus. You orchestrate the critical analysis. You should seldom contribute anything but paraphrasing and encouragement.

A student-centered class discussion will reveal a host of common-sense conceptions ("misconceptions") that students continue to harbor in spite of clever demonstrations and hands-on activities (for example, "Do atoms reproduce?"). Usually a teacher-centered class discussion (characterized by a teacher's questions, followed by a student's response, followed by a teacher's elaboration) never unearths these preconceptions and, therefore, little learning actually occurs in spite of the fact that the correct words were uttered out loud in the classroom.

How to Be a Good Leader

Being a good discussion leader takes much practice, enthusiasm, sensitivity, and the preparation of clever discussion questions. The following suggestions may help to initiate or to polish your skill as a leader of a student-centered class discussion:

- **Organized preparation.** Students must prepare for a discussion, either by working on a common activity individually or cooperatively in a small group, or by working on complementary activities, for example, different points of view on an issue.
- **Seating arrangement.** Eye contact is often essential for most discussion. Thus, sitting in a circle is ideal. Your "body language" is important, too. For example, teachers who sit with their students in a circle usually have better discussions than teachers who sit in a "privileged" position in the classroom. The more provocative the discussion, however, the less important the seating arrangement becomes. A teacher's "privileged" seating position may be necessary for ensuring control over a particularly lively discussion.
- **Initiating the discussion**. Begin with specific concrete questions that lead to information that you want students to analyze further; that is, begin with "low level" thinking questions. Use a wait-time of at least five seconds. ("Wait-time" is the length of the silence between the finish of your asking a question and the beginning of your uttering another comment or question.)
- **Sustaining a discussion**
  - — Do not evaluate a contribution but accept all contributions for discussion purposes. Again, the most successful discussions have the least teacher talk. Do not display your rich array of knowledge.
  - — Encourage all students to join in. Pinpoint discrepancies and ask quick-thinking students to make sense out of them. Invite quieter students to summarize, paraphrase, or explain another student's contribution.
  - — Seek out different points of view.
  - — Be sensitive to students' feelings and idiosyncrasies.
  - — Maintain an aura of enthusiasm.
  - — Encourage students to talk to each other by getting them to argue or by not giving the speaker your eye contact.
  - — Look for fallacies in reasoning, but encourage students to argue over the fallacies.
  - — Insist on common courtesy toward the person speaking. A lively class discussion can degenerate into several unwanted, though lively, small group discussions.
  - — Turn student questions back to the class for reasoned answers; don't necessarily answer them yourself.
- **Ending the discussion.** Summarize the main points or crucial issues. An informative summary (notes on the chalkboard perhaps) gives students a sense of accomplishment as well as a sense of what is important to remember. A summary is not a list of points you hoped would emerge from the discussion.

Appendix C

Hints on How to Conduct Small-Group Work

Adapted and reprinted with permission from *Logical Reasoning in Science and Technology, Teacher's Guide*. Glen Aikenhead, Rexdale, Ontario: John Wiley and Sons Limited, 1991, pp. 17-19.

Working in groups of two to six students is a very effective configuration. Students become more intellectually active and take more responsibility for their learning. Students also improve their critical-thinking competencies, subject-matter achievement (both high achievers and low achievers), and self-esteem. The more cooperative the members become, the more successful the group work. Small groups fail when one person does all the work or when the group is simply a homework bee.

Group work does not mean that you absent yourselves from the classroom. Your role is to manage the groups, showing them how to best meet the objectives, the ones you set for them.

Basic Ingredients to Successful Group Work

- Group work should be organized in such a way that group members become dependent on each other in positive ways, such as the division of labor in carrying out roles, getting resources, and completing the task.
- Individuals are still accountable for mastering the material or developing the skills required by the teacher. Evaluation can still take place on an individual basis. However, group work is usually most effective when a group grade (modified by individual evaluations) is assigned to each member of the group based on the group's collective accomplishment. The collective evaluation encourages individual accountability and positive dependence on one another.
- Social skills that need to be developed become evident as groups work on a task. Your role is not to solve these little problems, but to help group members resolve the problems, themselves.

How to Implement Group Work

- **Familiarity of students with group work.** Working in groups is a complex skill that must be developed. (High school students who attend small schools often have a natural advantage in this regard over students who attend large schools.) Students often need coaching when they attempt to work in small groups. Their familiarity with roles and responsibilities takes time. Teachers who rely heavily on group work tend to use special activities that teach students their roles and responsibilities for group work.
- **Group size.** This will vary from two to six, depending on the complexity of the task, the class enrollment, availability of resources, and so forth.
- **Assignment to groups.** Group membership can be student selected, randomly assigned, or teacher assigned. Considerable research on this topic suggests that the greatest productivity arises when you decide on the group composition. You have the best understanding of what must be accomplished and, therefore, which combinations of students will most effectively reach those accomplishments. However, when the task requires students to investigate at home, students themselves will likely select their groups best because they know who lives near each other for easy access for working together. Random assignment

sounds "fair," but is usually not a very rational decision. Friends in the same group often initiate agendas different from the group's task agenda. However, when the group task is uninteresting to students, friendship grouping is used to "ease the pain."

- **Composition.** Heterogeneous student groups have been shown to work more effectively than homogeneous groups. This is also true of professional research teams in science and engineering. Heterogeneous grouping is essential for decision making and controversies. However, when a class has a number of dominant students who tend to take over a group, it is often a good idea to group the dominant students together, thereby giving the shyer students greater opportunity to participate.
- **Duration.** Students often react more positively when groups are reformulated with different members for each new task. However, you may wish to establish "discussion groups" and "lab groups," for instance, that maintain the same group composition over a long period of time. These groups would meet on a more routine basis. Their advantage is the group cohesiveness that often develops over time.
- **Seating arrangements.** The physical arrangement of chairs and tables turns out to be very important to the success of small groups. Each time you plan a small-group activity, automatically decide on the most helpful and convenient seating arrangement. Interference between two groups can be avoided, for instance, by a slight twist of one desk. Group discussions need eye contact to sustain themselves, as well. In the role of manager, you should constantly monitor the success of the seating arrangement.
- **Structuring the learning materials.** Students can waste valuable time searching inefficiently for resource materials. On the other hand, if you always supply the information, how are students going to learn to inquire independently? The degree of structure in the learning materials will depend on the maturity of the students, the objectives of the task, and the time you have available.
- **Clarifying the task to be accomplished.** The outcomes for any successful small-group work must be clear to all members. What is the expected finished product? How will the evaluation work? What are the group roles that must be filled? Ineffective groups spend time wondering what you want. A work sheet or set of written directions helps students understand the group's objectives.

  Not all groups need to do the same task. Different groups can work on different facets of a larger problem.
- **Structuring the positive dependence among members.** The basic ingredients to successful group work must be planned out. Differentiated roles and responsibilities can be written into the students' directions. For example:

  Procedure
  — elect a team leader
  — the leader appoints a recorder, a writer, and a library search person
  — remember, criticize ideas, not people
  — your mark will be based on how well your group takes advantage of each member's expertise and on how logical and thorough your argument is supporting your conclusion
- **Interacting with and monitoring group work.** A teacher who is managing a class engaged in group work does not mark exams or take telephone calls while students are working. Your time is spent joining groups for various reasons: to clarify or provide assistance on how to achieve the task, to teach collaborative or communication skills, to underscore an important contribution by a student, to take advantage of "teachable moments," to collect information that will be valuable later when your role changes to class discussion leader (to sustain a student-centered discussion by engaging specific students who have certain ideas), to fill out formal check lists for evaluation purposes (for example, contributed ideas, asked questions, listened actively, expressed encouragement, challenged an idea, and so forth).

Appendix D

Critical Reading and Thinking

Taken from *A Guide to Curriculum Planning in Home Economics*. Madison, WI: Wisconsin Department of Public Instruction, 1987, pp. 161-165.

Why are Critical Reading and Thinking Skills Important?

Although critical thinking is essential for reading comprehension, recent reports from the National Assessment of Educational Progress indicate that students today possess "very few skills for examining the nature of ideas that they take away from reading." That is to say, young people are not able to analyze and evaluate text material; they are likely to be merely passive receptors.

Critical reading and thinking are necessary for citizens of a democratic and highly sophisticated technological society. Decisions required of the citizen, consumer, and worker all call for thoughtful reflection. Indeed, one cannot function as an informed voter, a careful consumer, or a rational decision maker without engaging in critical reading and thinking.

What is Meant by Critical Reading and Thinking Skills?

Critical readers are conscious of the power of printed messages. They realize that writers' abilities to present their ideas effectively and the quality of information presented can vary widely. Consequently, critical readers use analytical and evaluative skills of their own to think about what they read.

Three main factors influence the ability to read and think critically.

Knowledge and Experience. Critical readers must have appropriate background knowledge in order to make an informed judgment about a text. Without relevant knowledge and experience, they will find it very difficult, if not impossible, to evaluate messages from reading.

Reasoning Skills. Background knowledge and experience are necessary, but not sufficient, prerequisites for critical reading. To be a critical reader also requires logical thinking.

Attitude. A questioning attitude is essential to critical reading and thinking. Critical readers constantly test what they read against previous understanding and logical criteria.

The process of critical reading requires three steps: comprehension, analysis, and evaluation. Readers must employ each of these (or consciously omit) before accepting as worthwhile the message of any written material.

Comprehension. Critical readers must understand what writers are saying before responding to their information or interpretations.

Analysis. Readers seek evidence to support their evaluation of the writer's ideas and style. Expository material requires readers to determine whether a writer's purpose is informa-

tional or persuasive. Analytical questions for reading expository material critically include the following:

- Is the writer an expert on the subject?
- What is the writer's purpose? Does the writer have a hidden motive, some purposes beyond those stated? How might the writer benefit if the reader accepts the writer's message?
- What assumptions does the writer make? Are they valid?
- What facts are presented? Are they accurate as far as can be determined? Are they relevant to the message?
- Do the facts support the conclusions presented?

In reading literature, critical readers analyze thematic and character development, use of imagery and symbols, plot development, writer style, and the relationships between form and content. See *A Guide to Curriculum Planning in English Language Arts* (Madison, WI: Wisconsin Department of Public Instruction, 1986) for a more extensive discussion of literary elements and approaches.

Evaluation. Evaluation involves comparing the results of one's analysis with pre-established standards and deciding how well the standards have been met. Readers may conclude that an author has made a strong or a weak or perhaps a mixed case for a given message. A literary work may be a significant work of art, likely to endure and affect many other readers, or it may seem merely a passing diversion. Good critical readers are able to formulate and substantiate such judgment.

How Can Critical Reading and Thinking Be Developed?

The research literature suggests several broad guidelines for effective teaching of critical reading and thinking.

- An attitude of critical thinking must be fostered at all stages and in all areas of the curriculum.
- Instruction in critical reading and thinking requires an ongoing commitment of both teachers and students. Brief units of exercises will not produce significant, long-lasting results.
- Instruction in critical analysis and evaluation should focus on content that students have already been studying. Emphasis should be placed on using the information rather than merely acquiring it.
- Opportunities to adapt acquired critical reading techniques to new situations should be provided.
- Numerous and continuing opportunities for practice in critical reading should also be provided.

Although most young children lack the reasoning ability and depth of knowledge of more advanced learners, there is evidence to suggest they are nonetheless able to carry out rudimentary forms of critical thinking. Stauffer's Directed Reading Thinking Activity (DRTA) can be helpful in developing critical readers. In a DRTA, students are encouraged to use their knowledge and experiences, as well as such reading aids as titles and pictures, to make predictions about the outcomes of a story. As reading proceeds, students are encouraged to check their predictions against new information in the story and, if necessary, revise their predictions. In this way, emphasis is placed on learning to analyze relevant information and to check the logic of one's guesses. Reading is approached as a problem-solving activity that can be interesting and creative rather than as a search for the one right answer to a literal-level question.

For more mature reading students (usually in middle and advanced grades), comparative reading assignments are a means of promoting critical responses to printed text. By comparing and contrasting different perspectives on a single topic, students become aware that an issue can be treated in different ways. They also sharpen their analytical skills as they identify and categorize likenesses and differences to gather evidence for judging the strengths and weaknesses of different texts. In such assignments, students might be asked to compare a subject's treatment in different textbooks, popular magazines, tradebooks, or reference books. They might compare different styles of writing—biography and fiction, or straight news accounts, editorials, critiques, or by-lined reports in mass media publications. At all reading stages, teachers can foster critical reading and thinking by modeling the behaviors of critical thinkers and readers as they interact with students in group or individual learning situations.

How Can Critical Reading and Thinking Skills Be Assessed?

Informal assessment of critical reading and thinking can be made by noting the quality of class discussion, evaluating oral or written responses to critical reading assignments, and judging answers to critical reading and thinking problems in all content areas.

Summary

The ultimate goal of critical thinking and reading instruction is to produce independent, self-directed critical readers and thinkers. To accomplish this, such instruction must teach students to think and read critically, to identify and defend their own criteria for evaluation, and to judge their own effectiveness as critical thinkers and readers.

Critical Reading and Thinking: Scope and Sequence

Stage	Teacher	Student
Emergent Reading	Encourages *how* and *why* questions	Asks *how* and *why* questions about stories and events
Beginning Reading	Helps children establish simple criteria for evaluating a character's actions and feelings	Uses background experience to judge the behavior of story characters
	Helps children develop criteria for identifying a good story	Compares stories and expresses a preference
	Helps children see that personal likes and dislikes can influence thinking	Begins to recognize that personal likes and dislikes may create errors in judgment
	Helps children understand that a single experience with another person or situation is usually inadequate for reaching a conclusion about the individual or situation	Recognizes when story characters reach incorrect conclusions based on limited evidence

Stage	Teacher	Student
Beginning Reading (continued)	Helps children develop criteria for determining whether a story is true or based on fantasy	Detects evidence indicating whether a story is true or make-believe
	Guides students to use the Directed Reading Thinking Activity. Introduces students to criteria for testing whether a statement is fact or opinion	Uses the Directed Reading Thinking Activity with guidance
Reading for Consolidation	Introduces students to such attributes of good informational writing as accuracy and completeness. Engages students in comparative reading activities to provide practice in using these criteria	Identifies clues which indicate whether a statement is fact or opinion
	Guides students to use Directed Reading Thinking Activity independently	Compares evidence indicating whether a story is true or make-believe
	Introduces students to common propaganda techniques	Uses the Directed Reading Thinking Activity with guidance
Reading to Learn the New	Engages students in identification and analysis of literary devices and the impression they create	Analyzes and judges with guidance the effects of various literary techniques
	Introduces students to text selection techniques — searching for indications of a writer's background and credentials — studying the preface for information on the writer's goal — checking the publication date and citations for clues to relevancy and reliability	Evaluates source credibility and reliability with given criteria and shares findings with peers and teachers

Stage	Teacher	Student
Reading for Independence	Demonstrates and provides practice in logically analyzing text material and other reading	Evaluates source credibility and reliability. Begins to apply tests of logic and scientific reasoning to informational and persuasive writing
	Teaches students to view conclusions from more than one point of view	Analyzes materials from different perspectives
	Gives students experiences in relating background knowledge and critical thinking abilities in order to question and refute claims in advertising and one-sided presentations of controversial issues	Resists emotional appeal of propaganda. Uses background knowledge and questioning to evaluate advertising and one-sided presentations of controversial issues
	Encourages and rewards students for raising critical questions and for developing and defending their own criteria for making judgments	Begins to probe materials using own criteria Reflects on reading
Mature Reading	Engages students in application of various critical reading behaviors through modeling, in-class discussions, and written assignments	Internalizes and automatically applies the probing questions about — the reliability of a purported authority — an author's assumptions (explicit and implicit) — whether a hypothesis or theory is warranted — whether statements are vague or specific — whether conclusions follow from the evidence presented

Teaching About Controversial Issues

Taken from *A Guide to Curriculum Planning.* Madison, WI: Wisconsin Department of Public Instruction, 1985, pp. 50-51.

The following are policy statements adopted by the Connecticut State Board of Education. They are offered here as examples for curriculum planning committees or other district personnel interested in developing such statements.

Controversial Issues

Learning to deal with controversial issues is one of the basic competencies all students should acquire. Controversial issues are those problems, subjects, or questions about which there are significant differences of opinion based for the most part on the differences in the values people bring to the appraisal of the facts or the issues.

Controversy is inherent in the democratic way of life. The study and discussion of controversial issues is essential to the education for citizenship in a free society. Students can become informed individuals only through the process of examining evidence, facts, and differing viewpoints; by exercising freedom of thought and moral choice; and by making responsible decisions. The perpetuation of the fundamental principles of our society requires the guarantee that there be opportunity for students to read, to gather information, to speak and to hear alternative viewpoints, and to reach honest judgments according to their individual ability.

In order for students to learn these competencies, teachers must be free to help students to identify and evaluate relevant information, to learn the techniques of critical analysis, and to make independent judgments. They must reinforce the students' right to present and support their conclusions before persons who have opposing points of view. Teachers should also endeavor to develop a flexibility of viewpoint in students so that they are able to recognize the need for continuous and objective reexamination of issues in the light of changing conditions in society and as new and significant evidence becomes available to support a change in viewpoint. Further, teachers should direct the attention of learners, at the appropriate levels of maturity, to significant issues and promote a lively exchange of ideas about them. Although teachers have the right to express their own viewpoints and opinions, they do not have the right to indoctrinate students with their personal views.

Academic Freedom and Public Education

Academic freedom is the freedom to teach and to learn. In defending the freedom to teach and to learn, we affirm the democratic process itself. American public education is the source of much that is essential to our democratic heritage. No other single institution has so significantly sustained our national diversity, nor helped voice our shared hopes for an open and tolerant society. Academic freedom is among the strengths of American public education. Attempts to deny the freedom to teach and to learn are, therefore, incompatible with the goals of excellence and equity in the life of our public schools.

With freedom comes responsibility. With rights come obligations. Accordingly, academic freedom in our public schools is subject to certain limitations. Therefore, the State Board of Education affirms that:

Academic freedom in our public schools is properly defined within the context of law and the constraints of mutual respect among individuals. Public schools represent a public trust. They exist to prepare our children to become partners in a society of self-governing citizens. Therefore, access to ideas and opportunities to consider the broad range of questions and experiences which constitute the proper preparation for a life of responsible citizenship must not be defined by the interests of any single viewpoint. Teachers, school administrators, librarians, and school media specialists must be free to select instructional and research materials appropriate to the maturity level of their students. This freedom is itself subject to the reasonable restrictions mandated by law to school officials and administrators. At the same time, local school officials must demonstrate substantial or legitimate public interest in order to justify censorship or other proposed restrictions upon teaching and learning. Similarly, local boards of education cannot establish criteria for the selection of library books based solely on the personal, social, or political beliefs of school board members. While students must be free to voice their opinions in the context of a free inquiry after truth and respect for their fellow students and school personnel, student expression which threatens to interfere substantially with the school's function is not warranted by academic freedom. Students must be mindful that their rights are neither absolute nor unlimited. Part of responsible citizenship is coming to accept the consequences of the freedoms to which one is entitled by law and tradition. Similarly, parents have the right to affect their own children's education, but this right must be balanced against the right other parent's children have to a suitable range of educational experiences. Throughout, the tenets of academic freedom seek to encourage a spirit of reasoned community participation in the life and practices of our public schools.

Since teaching and learning are among the missions of our public schools, the State Board of Education affirms the distinction between teaching and indoctrination. Schools should teach students how to think, not what to think. To study an idea is not necessarily to endorse an idea.

Public school classrooms are forums for inquiry, not arenas for the promulgation of particular viewpoints. While communities have the right to exercise supervision over their own public school practices and programs, their participation in the educational life of their schools should respect the constitutional and intellectual rights guaranteed school personnel and students by American law and tradition.

Accordingly, the State Board of Education, in order to encourage improved educational practices, recommends that local school boards adopt policies and procedures to receive, review, and take action upon requests that question public school practices and programs. Community members should be encouraged, and made aware of their rights, to voice their opinions about school practices and programs in an appropriate administrative forum. The State Board of Education further recommends that local school boards take steps to encourage informed community participation in the shared work of sustaining and improving our public schools.

Finally, the State Board of Education affirms that community members and school personnel should acknowledge together that the purpose of public education is the pursuit of knowledge and the preparation of our children for responsible citizenship in a society that respects differences and shared freedom.

The Behaviors of Intelligence

by Arthur L. Costa

Reprinted with permission from *Developing Minds: A Resource Book for Teaching Thinking*. Arthur L. Costa, ed. Alexandria, VA: Association for Supervision and Curriculum Development, 1985, pp. 66-68.

As a result of observing, describing, analyzing, and classifying the behaviors of efficient scientists, successful entrepreneurs, accomplished artists, capable workers, effective managers, and so forth, we have been able to synthesize a list of pervasive behaviors that seem to be characteristic of intelligent action. What follows is an interpretation of those indicators, which draws heavily from Feuerstein's definitions in the Instrumental Enrichment Curriculum. (The graphic on page 116 shows how a fifth-grade teacher charted this information for her students.)

1. *The basis of all thinking involves taking in information through the senses. Listening, smelling, observing, tasting, and feeling are the processes through which all information is passed to the brain.* Intelligent human beings

- use these senses to gather complete information (perceiving clearly).
- are alert to problems, discrepancies, and conflicts in the information perceived.
- are tolerant of ambiguous situations.
- have a system or plan to collect all information and do not need to repeat observations (exploring systematically).
- name the objects, conditions, and events being observed and experienced with precision so that they can be remembered and discussed (labeling).
- describe objects, conditions, and events in terms of where and when they occur (perceiving temporal and spatial relationships).
- identify which characteristics of an object, event, or condition remain the same when changes take place (observing constancy).
- consider more than one variable when organizing and reorganizing the information gathered (using more than one frame of reference).
- strive to be precise and accurate.

2. *Some meaning must be derived from all the received information. Intelligent human beings act on that information in ways to make sense of it.* Intelligent human beings

- define the problem, determine what is needed to resolve the problem, and design strategies to solve it (analyzing discrepancies).
- select from the information gathered that which is relevant and applicable and that which is not (perceiving relevance).
- have a goal—a picture, vision, or image of what to look for and how to find it, and change or alter that image when necessary (interiorizing).
- identify data needed to accomplish goals and generate strategies to produce those data (strategic reasoning).
- develop a plan or strategy that includes the steps needed to reach the goal (systematic planning).
- remember the various pieces of information needed (broadening the mental field).
- search for relationships (hierarchical, temporal, sequential, comparative, syllogistic, causal, and so on) among disparate objects, conditions, events, and past experiences (projecting relationships).
- search for similarities and differences among objects, conditions, and events (comparing and contrasting).

- find the class or set to which a new object, condition, or event belongs (classifying, categorizing).
- explore alternate solutions and project what might happen if one or another were chosen (hypothesizing).
- defend an opinion with logical evidence, seek evidence to support more than one hypothesis, and are critical of their own and others' propositions that lack logical evidence.
- have a repertoire of problem-solving strategies to select from when one does not produce desired results (flexibility and perseverance).

3. *The meaning derived from acting on environmental data is communicated to others, applied in novel situations, and constantly evaluated for accuracy.* Intelligent human beings
- communicate accurately and precisely (using precise language).
- express another person's ideas, point of view, and feelings accurately (overcoming egocentrism).
- think through a solution or answer, thus decreasing mistakes and repetition (overcoming trial and error).
- use memory and past experiences to draw forth relevant data and strategies that are needed to solve the problem at hand (overcoming an episodic grasp of reality).

Behaviors Characteristic of Intelligent Action—5th-Grade Class

Getting What We Need

- Use our senses (listen, see, smell, taste, and touch) to get information
- Use a plan (system) so we do not miss or skip anything important
- Give what we do a name
- Tell where and when
- Tell what stays the same even when things seem to change
- Be able to use more than one idea at a time
- Be careful when it matters

Using Information

- Know what we are asked to do
- Use only the information we need
- See a picture in our mind of what we must do
- Plan our steps
- Keep all the facts in mind
- Find out how things go together
- Tell what is the same and what is different
- Find where things belong
- Think things out in our heads—then choose
- Prove our ideas

Showing What We Know

- Think before we answer—don't rush
- Tell it clearly
- If we "know" the answer but can't tell it right away, wait—then try again
- Don't panic

We Do Our Best

- Check to make sure our job is finished
- Think about your own thinking
- Listen to others tell about their ideas

- pause to formulate an idea before saying the first thing that comes to mind (restraining impulsivity).
- invent novel, creative images, solutions, and relationships (fluency, flexibility, originality).
- use alternate strategies to find answers when they are not immediately apparent, and do not give up in panic or despair (persistence, perseverance, overcoming blocking).
- check to see if the results of the strategy (product) match the intended outcome (image) (checking for accuracy).
- strive for quality, craftsmanship, and accuracy.

4. *Being conscious of their own behaviors (metacognition) and their effects on others is not only a characteristic of mentally healthy people, but also an attribute of effective problem solvers.* Intelligent human beings
- plan a strategy to solve a problem, monitor their progress along the way, and evaluate their strategy before, during, and after the conclusion is reached (metacognition).
- know when they need additional information and devise systematic strategies to gather it.
- use environmental cues to determine which behaviors are appropriate in certain situations (rational/intuitive, playful/purposeful, cooperative/competitive, and so on).

Toward a Hierarchy of Thinking: Skills, Strategies, Creativity, and Attitudes

Obviously, there is no one way to classify thinking skills. The following four-tier system has been found helpful as a way to organize for teaching, select programs, and adopt and develop instructional materials. A well-rounded instructional program that promotes thinking should attempt to develop all four levels.

Level I: The Discrete Skills of Thinking

This category includes individual, discrete mental skills that are prerequisite to more complex thought, such as:
- Input of data
  - — gathering data through the senses (listening, observing, smelling, tasting, and feeling)
  - — being alert to problems, discrepancies, and dilemmas
  - — being fascinated by the environment
- Elaborating (processing) the data:
  - — comparing/contrasting
  - — analyzing/synthesizing
  - — classifying/categorizing
  - — inducing/deducing
  - — perceiving relationships (temporal, analogous, seriational, spatial, hierarchical, syllogistic, transitive, symbolic)
- Output of the products of elaboration:
  - — inferring
  - — hypothesizing
  - — predicting/forecasting/extrapolating
  - — concluding/generalizing/summarizing
  - — evaluating

Level II: Strategies of Thinking

This category involves the linkage of the discrete skills to strategies. People employ these tactics when faced with situations to which the resolution or answers are not immediately known.

- problem solving
- critical thinking
- decision making
- strategic reasoning
- logic

Level III: Creative Thinking

These are the behaviors of novelty and insight. We use them to create new thought patterns, unique products, and innovative solutions to problems. Because they are so idiosyncratic, they are difficult to define and reproduce. It is believed, however, that with properly designed instruction, they can be developed.

- creativity
- fluency
- metaphorical thinking
- complexity
- intuition
- model making
- insight
- imagery

Level IV: The Cognitive Spirit

With all the above skills identified and defined, there is still something missing. The thinking person must have the willingness, disposition, inclination, and commitment to think. Some of the attitudes and tendencies that demonstrate this internalization of the thinking spirit include:

- being open-minded
- withholding judgment
- being honest
- seeking to become more informed
- dealing with ambiguity
- striving for precision, definition, and clarity
- remaining concerned with the central issue or main points
- perceiving relationships between the basic concern and the discussion at hand
- being willing to change with the addition of more information or for compelling reasons
- taking a stand when the evidence and reasons are sufficient to do so
- being sensitive to the feelings, level of knowledge, and concerns of others

The Good Thinker

by Allan G. Glathorn and Jonathan Baron

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Schools that are planning to teach critical thinking are surrounded by what seems to be a bewildering variety of programs. It would be helpful to have a theory of critical thinking that would allow educators to assess the theoretical soundness and effectiveness of such programs. In this chapter we describe one such theory and discuss its implications for educational practice.

Baron's Model of the Good Thinker

The model proposed by Baron (in press) is based on a philosophical argument in the tradition of Dewey (1933), but is consistent with empirical evidence as well. Before we describe it in detail, we would like to point out two important features.

First, it is a model of *conscious* thinking. In conscious thinking, we are aware of thinking; we can follow instructions about its processes and evaluate our use of those processes. In unconscious thinking, much of the thinking work is taken over by subconscious processes. Baron's model focuses on conscious thinking because only conscious thinking can be influenced directly by pedagogical interventions.

Second, it is a *general* model that provides insight into several types of thinking; it is not domain- or discipline-specific. It presents a picture of, for instance, how a mechanic diagnoses a problem with a car engine and how a principal chooses a method to improve school attendance. In essence, the model involves several closely related processes or phases.

- Thinking begins with a state of doubt about what to do or believe. As Dewey (1933) noted, all conscious thought has its genesis in uncertainty; the individual is confronted with a problematic situation.
- We usually have a goal in mind when the doubt arises, but we may search for new goals, subgoals, or a reformulation of the original goal. The goal is the state we wish to achieve, such as a new insight or an effective solution. Implicit in each goal is a question that we want to answer: "What is wrong with the car?" "What methods will increase attendance?"
- We search for possibilities. Possibilities are possible answers to the question implicit in the goal. They are the alternative routes or options to solution. Each possibility has a strength—a measure of the value we accord that possibility. The strength is a subjective assessment of the closeness of the solution to the goal, and is always determined from our personal perspective, not from an outsider's viewpoint. While we may be influenced by the views of others, it is our own assessment of strength that makes the difference.
- We search for evidence relative to the possibilities. Evidence is needed to evaluate possibilities. We search for arguments, scenarios, analogies, and facts that bear on the possibilities.
- We use the evidence to revise the strengths of the possibilities. Each piece of evidence has a subjective weight for each possibility. We may either overreact or minimize this weight.
- We decide that the goal is reached and conclude the search. At a certain point we terminate the search for goals, possibilities, and evidence, deciding that further searching would be counterproductive.

The most important components of the model are the three search processes—the search for goals, the search for possibilities, and the search for evidence. At times these searches are active—we exclude all other conscious activities. At other times they are inactive—we postpone judgment while pursuing other activities. Note also that while the processes are presented here in a linear form, they do not all occur consciously in every thought sequence and are ordinarily not used in a linear order.

Some Common Types of Thinking

When we examine the types of thinking that are essential to certain activities, we need to ask whether there is too much or too little thinking (relative to a range that would be optimal for the thinker's rational goals), but we usually cannot ask whether thinking occurs at all. There are nine types of thinking.

Diagnosis is troubleshooting, for which we use our hypotheses about the source of the problem. The evidence may consist of the results of tests we have performed. The goal is usually fixed. "My car stalls at corners—what's going wrong?"

Hypothesis testing is the process of forming and testing theories, just as scientists test theories. During hypothesis testing, the goal is often changed. Scientists frequently discover the real question while trying to answer some other question.

Reflection is the search for general principles or rules based on evidence gathered largely from memory: "What general principle might explain why teachers often ignore curriculum guides?" "What are the rules for simplifying algebraic expressions?" We search for possible answers, new questions, and evidence that supports the possible answers. Here the search for evidence is under considerable control; we might direct our memories to provide evidence either for or against a given possibility. Philosophers and other scholars spend most of their time reflecting. It is a major component of Lipman's Philosophy for Children program (Lipman, Sharp, and Oscanyon, 1980).

Insight is the "eureka" phenomenon. Solutions come suddenly and with certainty. In insight problems it is only the search for possibilities (possible answers or approaches) that seems under control; the search for and use of evidence are usually immediate. In this sense, insight problems are atypical of most thinking.

Artistic creation is also an important type of conscious thinking. The possibilities are the components of the work itself, such as the images in a poem, the colors in a painting, or the movements in a dance. The weight of the evidence for a given possibility is the artist's critical reaction to the evidence itself. In creative tasks the search for goals is under full control and is usually crucial for success.

Prediction is similar to reflection, but the search for goals may not be as controllable. The evidence usually consists of memories of past situations and analogous cases.

Behavioral learning involves learning about the effects of one's conduct. When we learn behaviorally, we try to accomplish two goals—to learn about the situation (for example, to learn how to cook) and to obtain success with the task at hand (to produce an edible meal). Often these goals compete. Repeating some action that has worked in the past might result in success, but it might also preclude the experimentation that is needed for learning. The same issues come up when we learn specific heuristics for problem solving or writing.

Learning from observation includes all cases in which we learn about the environment through observation alone, without voluntary experimentation. In this sense most language learning is a type of learning from observation, as are most types of culturally transmitted knowledge. In this type of thinking, the search for evidence is not controllable at all.

Good Thinking vs. Bias

Without corrective intervention, there are two general biases that may occur. First, we might search too little, give up too soon, or be too satisfied with the first possibilities, evidence, and goals that enter our minds. We tend to do this because the cost of thinking—time, effort, and lost opportunity—is immediate, but the benefits of thinking—increased knowledge and better decisions—are usually in the future. Thus, learning to think well is a problem of self-control, just like saving money.

The second bias is that we may not be sufficiently self-critical. We might seek evidence that supports, rather than conflicts with, our initial ideas, and we might ignore contrary evidence or fail to try to think of alternatives. This bias allows us to stop thinking early. Thus, the first bias reinforces the second.

Both biases are difficult to correct without help, for those of us who are not self-critical or who give up early will never have a chance to experience the beneficial effects of better thinking. Of course, there are people who think too much or are too self-critical. But according to the theory, those people are victims of too much education.

Good Thinking vs. Poor Thinking

This model helps us make some valid and useful distinctions between good and poor thinking. Here we wish to distance ourselves from those who equate good thinking with a long list of discrete mental operations and those who describe poor thinking in terms of several logical errors. We argue for the analysis summarized in the graphic on page 122. This analysis enables researchers and educators to focus attention on a smaller number of critical attributes. For clarity, this graphic contrasts good thinkers with poor thinkers; however, we do not mean to suggest that individuals should be so categorized. A person can be, for example, a good thinker in financial and a poor thinker in personal matters.

Given this caveat, we begin by noting that there are some general traits that characterize good thinkers. Good thinkers are willing to think, and may even find thinking enjoyable. They can carry out searches when necessary and suspend judgment. They value rationality, believing that thinking is useful for solving problems, reaching decisions, and making judgments. Poor thinkers, in contrast, need certainty, avoid thinking, must reach closure quickly, are impulsive, and rely too heavily on intuition.

These traits are predictably manifested throughout the three searches. When searching for goals, good thinkers are deliberative and take the time necessary to reflect on several possible goals; poor thinkers are impulsive and choose one of the first goals that comes to mind. Like scientists, good thinkers can identify new goals while working on others; they can put aside the original question when a more basic one appears. Poor thinkers are reluctant to change goals, believing that changing one's course is a mark of weakness.

When searching for possibilities, good thinkers again manifest deliberateness; they can wait to find additional possibilities, and they are open to multiple options since most problems permit several solutions. Poor thinkers prefer to consider only a few possibilities—"There are only two sides to every question"—or, even worse, only one.

Good Thinking vs. Poor Thinking

Aspect	*The Good Thinker*	*The Poor Thinker*
General Traits	• welcomes problematic situations and is tolerant of ambiguity. • is sufficiently self-critical; looks for alternate possibilities and goals; seeks evidence on both sides. • is reflective and deliberative; searches extensively when appropriate. • believes in the value of rationality and that thinking can be effective.	• searches for certainty and is intolerant of ambiguity. • is not self-critical and is satisfied with first attempts. • is impulsive, gives up prematurely, and is overconfident of the correctness of initial ideas. • overvalues intuition, denigrates rationality; believes that thinking won't help.
Goals	• is deliberative in discovering goals. • revises goals when necessary.	• is impulsive in discovering goals. • does not revise goals.
Possibilities	• is open to multiple possibilities and considers alternatives. • is deliberative in analyzing possibilities.	• prefers to deal with limited possibilities; does not seek alternatives to an initial possibility. • is impulsive in choosing possibilities.
Evidence	• uses evidence that challenges favored possibilities. • consciously searches for evidence against possibilities that are initially strong, or in favor of those that are weak.	• ignores evidence that challenges favored possibilities. • consciously searches only for evidence that favors strong possibilities.

When searching for and using evidence, the differences are marked. Good thinkers deliberately search for evidence that opposes the favored possibilities, as well as evidence that supports them. Poor thinkers, on the other hand, search only for confirming evidence. Good thinkers use evidence, whether or not it supports the favored possibilities; poor thinkers ignore negative evidence. Psychologists who have studied the persistence of irrational beliefs attribute such persistence to this bias in searching for and using evidence. (See, for example, Nisbett and Ross, 1980; Baron, in press.)

Fostering Good Thinking: The Classroom Climate

Our goal as educators is to foster the development of the "good-thinker" attributes while helping students understand the limitations of contrary dispositions and behaviors. One fundamental approach is to provide a classroom climate conducive to and supportive of the attributes of good thinking. The model suggests three crucial elements.

A spirit of inquiry. The classroom where thinking is fostered is one where inquiry is valued. The teacher admits uncertainty: "We're not really sure how evolution works." "I'm not sure about my interpretation of the poem—I continue to see other things in it." The

teacher welcomes intellectual challenges: "You're right in raising that issue—I need to rethink that matter." The teacher also emphasizes education in all subjects as an exploration into the unknown, as well as teaching what is known. And the teacher repeatedly conveys his or her own belief in the value of thinking. Intuition is valuable, but intelligent people look beyond their hunches.

An emphasis on problem finding. Most classrooms are places where answers are sought and solutions are valued. In a thinking-centered classroom, students are taught and encouraged to find problems, to wonder, and to speculate. The unthinking person observes graffiti and either smiles or frowns. The thinking person wonders: "Why is graffiti in Europe so often political—and in the United States, more commonly scatological?" The teacher nurtures the problem-finding attitude by encouraging students to ask questions, not just answer them: "Here are some data about income distribution in the United States—what questions could we ask?" "We'll be studying family life in Israel—what questions would you like to have answered?"

A more deliberative pace. Many classrooms seem to encourage impulsiveness—the teacher asks a question, expects an immediate answer, and calls on the first student who waves a hand. Such rapid-fire recitations are useful in several ways. They facilitate assessment of student knowledge, permit rehearsal of facts, and keep students attentive; yet they can be counterproductive when thinking is the focus. Students need time to deliberate—to reflect about alternate possibilities, to weigh the evidence, and to come to a tentative conclusion. One useful way to reinforce such deliberation has been suggested by David N. Perkins (Personal communication, 1984): wait until all students have raised their hands before calling on anyone; then call on three and discuss the differences in their answers.

Whenever possible, examinations should allow time for reflection and discourage guessing. Some students will refuse to learn to think, despite strong encouragement, unless they are convinced that thinking will improve their grades. It is inconsistent to encourage thinking in the classroom and discourage it on tests.

Teaching Good Thinking: Methods That Might Work

We will not pretend that we have worked out all the pedagogical implications of the model; much more research and development need to be done. However, our review of previous research on teaching thinking and our educational analysis of Baron's model lead us to believe that certain approaches might be effective.

Teaching thinking in all subjects, wherever appropriate. Evidence suggests that such multidisciplinary approaches are more effective than single courses in critical thinking. The model is sufficiently general in scope that it can be used in a variety of school subjects: the student designing a bookcase in industrial arts and the student interpreting a poem in English class are both engaged in thinking—or can be if the task is presented in a manner that encourages thinking. Of course, there are important differences that should be emphasized: evidence sought to support a given bookcase design is quite different from that offered for a particular interpretation of a poem. Students need to understand both the general model and its particular applications. In some cases, prepared materials designed with thinking in mind may be helpful, but materials alone will not be effective.

Present students with case studies of good thinkers. Students can learn a great deal by studying detailed examples of good thinkers at work. They can see the model at work and understand why the processes are used differently in each course. They can understand that good thinking is not limited to a given sex, to a particular social class or ethnic group, or to scientific endeavors. They can see that the best thinkers are often wrong, and the path to truth is often tortuous and uncertain. Watson searching for the DNA helix, Frost struggling with a poem, and Boorstin trying to find patterns in the discoverers are all examples of imperfect humans engaged in exciting quests.

Present students with subject-related problems that require them to use the processes. Not all learning should be discovery learning; there is a time for presenting formulas, explaining concepts, and conveying information. But in each subject the teacher should develop a unit of study in which the students occasionally use the model—first with teacher coaching and then on their own. Some subjects, such as language arts, can be presented primarily from a thinking vantage point.

Focus selectively on the relationships of the important search processes to particular subjects. We do not argue here for the teaching of discrete skills; however, there is educational merit in giving selective attention to setting goals, searching for possibilities, and weighing evidence as occasions present themselves in the classroom—"The present goal of our foreign policy seems to be one of expanding our sphere of influence. What other goals might we have?" "Recent research suggests that cancers are virus-related. What other possibilities might be investigated?" "The manufacturer reports that this medicine is more effective than aspirin. How reliable is that evidence? What type of evidence might be more helpful?"

Provide appropriate opportunities for applying the model to personal decision making. Most educators agree that children and adolescents need help with personal decision making. The model has direct application to a variety of personal issues, such as moral choices, consumer decisions, and career options. In appropriate subjects students could be taught how to apply the model to these and other types of personal decisions.

We do not claim that this model is the best, nor do we guarantee that its methods will be effective. We know, however, that the model is sound in theory and consistent with available evidence. And we believe that the classroom climate and teaching methods we have suggested have a good chance of helping students become better thinkers.

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AODA Curriculum Matrix

Grade

❑ Kindergarten ❑ 1

Curriculum Area

													Needs Further Development		
Influences on AODA Conceptualization													**Yes**	**No**	**Comments**
A. What have I learned, in and out of school, about alcohol and other drug abuse (AODA)?															
B. Where and how has this AODA information been learned?															
C. What are my words and actions teaching others about alcohol and other drugs?															
Effects of Alcohol and Other Drug Abuse													**Yes**	**No**	**Comments**
A. What are the similarities and differences among foods, medicines, drugs, and poisons based on their effects and the conditions in which they are used?															
B. How do I decide which foods, medicines, drugs, and poisons are good or bad for me?															
C. What are examples of the effects of foods, medicines, drugs, and poisons that can be immediately seen or happen more slowly over time?															
Rules About Alcohol and Other Drugs													**Yes**	**No**	**Comments**
A. What rules exist for me regarding foods, medicines, drugs, and poisons?															
B. How did I learn these rules? Do I follow them?															
C. Do all families and individuals have the same rules about foods, medicines, drugs, and poisons? Explain.															
D. Why do rules exist about foods, medicines, drugs, and poisons?															
Keeping Safe From Alcohol and Other Drug Abuse													**Yes**	**No**	**Comments**
A. What feelings do I have that I label as good, bad, or mixed?															
B. Who can help me when I'm feeling bad or confused?															
C. What do I know and what do I do to keep myself safe and healthy?															

Grade

❑ 2 ❑ 3 ❑ 4

Curriculum Area

Influences on AODA Conceptualization	Needs Further Development: Yes	No	Comments
A. What new ideas am I learning about alcohol and other drug abuse?			
B. Where and how has this new AODA information been learned?			
C. What beliefs about alcohol and other drug abuse do I hold that might be biased or stereotyped?			
D. How do my beliefs about AODA and my sources of AODA information compare to those I held in earlier grades?			
E. What are my words and actions teaching others about alcohol and other drugs?			
F. How do my words and actions concerning alcohol and other drug abuse compare with what others are teaching me?			
G. What is peer pressure? What distinguishes good pressure from bad pressure?			
H. Can peer pressure be both good and bad at the same time? Explain.			
I. How do I use peer pressure to my advantage?			
J. How does my use of peer pressure affect others?			
K. How much of what I learned about alcohol and other drugs in earlier grades do I use in my everyday life?			

Effects of Alcohol and Other Drug Abuse	Needs Further Development: Yes	No	Comments
A. How do alcohol and other drugs affect the mind and body?			
B. How do I distinguish between positive, negative, or mixed effects of alcohol and other drugs?			
C. When might the bad effects of alcohol and other drugs seem good to a person?			
D. What are alternative ways to feel good without using alcohol and other drugs?			

Curriculum Area

Grade

❑ 2 ❑ 3 ❑ 4

Rules About Alcohol and Other Drugs	Needs Further Development: Yes	No	Comments
A. What are similarities and differences in the rules set by me, my family, my school, and my community regarding alcohol and other drugs?			
B. Do I keep these rules in all circumstances? Explain.			
C. Why are some rules about alcohol and other drugs broken?			
D. What are consequences of breaking rules related to alcohol and other drugs?			
E. Is it ever right to break a rule? Why do rules exist if people can and do break them?			
F. Why can I hold healthy beliefs and accurate knowledge about AODA and yet fail to follow rules?			

Keeping Safe From Alcohol and Other Drug Abuse	Needs Further Development: Yes	No	Comments
A. What is a risk?			
B. What criteria do I use to label the risks I take as positive or negative?			
C. How do I keep safe and healthy and still take risks?			
D. What personal skills do I have or need to develop to stay away from unsafe risks?			
E. What are my personal traits that make it difficult for me to stay safe and healthy?			
F. What people, programs, and organizations in my school and community help people who have AODA-related problems?			

Curriculum Area

Grade

❑ 5 ❑ 6 ❑ 7 ❑ 8

Influences on AODA Conceptualization	Needs Further Development: Yes	No	Comments
A. What are my beliefs and attitudes about alcohol and other drugs?			
B. What are my most valued sources of AODA information and influence?			
C. Are my beliefs, including stereotypes and biases, enabling me and other to deny or see the truth about AODA?			
D. How do my beliefs including stereotypes and biases, influence my behavior regarding alcohol and other drugs?			
E. For whom am I a valued source of AODA information and influence?			
F. What are my least valued sources of AODA information and influence?			
G. What is my criteria for deciding to believe or reject AODA information?			
H. How much of what I have already learned about alcohol and other drugs influenced my behavior and attitudes regarding AODA?			

Effects of Alcohol and Other Drug Abuse	Needs Further Development: Yes	No	Comments
A. How has other people's use of alcohol and other drugs affected me?			
B. What new AODA effects am I aware of now that I am older?			
C. How are effects of alcohol and other drugs on mind and body related to individual differences (such as age, weight, or gender)?			
D. How does alcohol and other drug abuse affect family and peer relationships?			
E. What impact has AODA had on our school and community?			
F. What effect has AODA had on our school and community?			
G. What effects of alcohol and other drugs signal misuse, abuse, or dependency?			

Curriculum Area

Grade

❑ 5 ❑ 6 ❑ 7 ❑ 8

Rules About Alcohol and Other Drugs	Needs Further Development: **Yes**	**No**	**Comments**
A. What criteria do I use to label rules (including AODA rules) as fair or unfair?			
B. How do labels influence my ability to follow rules?			
C. How do consequences for breaking specific AODA rules change as people get older?			
D. How might alcohol and other drugs affect my ability to follow the rules my family, friends, school, and community have set for me?			
E. How might alcohol and other drugs affect my ability to follow the rules I have set for myself?			
F. What changes are occurring in the rules that my peers, family, school, and community set for me concerning alcohol and other drugs?			
G. How do my rules concerning alcohol and other drugs compare with rules for these substances in other cultures and communities?			
H. How do my internal rules differ regarding tobacco, alcohol, and illegal drugs?			
I. What are some spoken and unspoken rules regarding tobacco, alcohol, and other drugs?			
J. Are all rules about alcohol and other drugs consistent among situations, people, and groups? Explain.			

Curriculum Area

Grade

❑ 5 ❑ 6 ❑ 7 ❑ 8

Keeping Safe From Alcohol and Other Drug Abuse															Needs Further Development		
															Yes	**No**	**Comments**
A. What skills and attitudes am I practicing to keep myself safe and help others keep safe from AODA?																	
B. What myths about AODA risks are promoted culturally? By my peers? By me?																	
C. What groups, individuals, or organizations can help me assess my risk or others' risks for AODA?																	
D. What is the danger in denying personal risks for AODA?																	
E. How strong is my ability, my friends' abilities, and my family's ability to make safe and healthy choices regarding alcohol and other drugs?																	
F. How do alcohol and other drugs affect my ability to keep myself and others safe and healthy?																	
G. What responsibility to others do I have to make safe choices about alcohol and other drugs?																	
H. What social systems exist to • develop positive skills and attitudes in citizens? • help those with AODA-related problems? • intervene with problems?																	

Curriculum Area

Grade

❑ 9 ❑ 10 ❑ 11 ❑ 12

Influences on AODA Conceptualization	Needs Further Development: Yes	No	Comments
A. What current economic, cultural, and social factors promote alcohol and other drug abuse?			
B. To what extent have tobacco, alcohol, and other drugs permeated my culture and community?			
C. How has this permeation of tobacco, alcohol, and other drugs influenced the way I demonstrate that I am becoming more adult?			
D. What concept of adulthood are others demonstrating for me?			
E. What concept of adulthood am I demonstrating for others?			
F. How does my use or nonuse of alcohol and other drugs enhance or detract from my sense of self-worth, sexuality, and gender identity?			
G. How do my family's and friends' views and practices regarding alcohol and other drugs affect my behavior?			
H. What stages has my thinking gone through since kindergarten regarding alcohol and other drugs?			

Effects of Alcohol and Other Drug Abuse	Needs Further Development: Yes	No	Comments
A. How do parents' choices regarding alcohol and other drugs affect their children?			
B. How does a person's alcohol and other drug use affect others? Misuse? Abuse? Nonuse?			
C. How do alcohol and other drug nonuse, use, misuse, and abuse affect a person's style of thinking or ability to think?			
D. How are these effects on thinking addressed in treatment and recovery?			
E. How do effects of alcohol and other drugs on the mind and body change if drugs are combined with one another or with other substances?			
F. What effect has AODA had on our city, state, nation, and world?			

Grade

❑ 9 ❑ 10 ❑ 11 ❑ 12

Curriculum Area

Rules About Alcohol and Other Drugs	Needs Further Development: Yes	No	Comments
A. What process do I now use to set rules for myself concerning alcohol and other drugs?			
B. How does this process compare with the way I established rules for myself when I was younger?			
C. Do my rules about alcohol and other drugs allow me to make positive choices for myself?			
D. Do my rules about alcohol and other drugs affect others positively, negatively, or in a mixed way?			
E. What are my internalized rules for alcohol and other drugs?			
F. How do these rules compare with previous rules and with external rules?			
G. What is the basis of the school's, community's, and society's thinking that generated current laws and policies related to alcohol and other drugs?			
H. How can a person differentiate norms from rules and laws regarding alcohol and other drugs?			
I. What are the implications for myself and others if the majority of people in society choose to ignore rules and laws related to alcohol and other drugs?			
J. What are the legal consequences for me of ignoring rules and laws related to alcohol and other drugs?			
K. What are justifiable criteria for judging the fairness of rules, laws, policies, and norms related to alcohol and other drugs?			
L. If rules, laws, policies, and norms related to alcohol and other drugs are proven unfair, what is the appropriate response for individuals and society?			

Curriculum Area

Grade

❑ 9 ❑ 10 ❑ 11 ❑ 12

Keeping Safe From Alcohol and Other Drug Abuse	Needs Further Development: Yes	No	Comments
A. What skills and attitudes have I developed that help keep me and others safe and healthy in relation to AODA?			
B. How consistently do I apply these skills and attitudes in AODA-related situations?			
C. What kind of support do I need to help me consistently use these skills and attitudes?			
D. How have my skills and attitudes improved as I've gotten older?			
E. How do these skills and attitudes affect my risk of • becoming infected with HIV or other sexually transmitted diseases? • having a child with fetal alcohol syndrome? • becoming a victim or perpetrator of sexual violence? • being involved in an unplanned pregnancy? • dropping out of school? • breaking the law?			
F. How can I foster positive skills and attitudes in others?			
G. How can I become involved in the social systems that exist to • develop positive skills and attitudes in citizens? • help those with AODA-related problems?			
H. How can I become an advocate for AODA programs in my school and community?			

Teacher Outcomes

Influences on AODA Conceptualization

A. What are my beliefs about alcohol and other drugs?
B. What experiences have I had that influenced my beliefs about alcohol and other drug abuse (AODA)?
C. What beliefs about AODA do I hold that may be biased or stereotyped?
D. How do my beliefs, including stereotypes and biases, influence my behavior regarding alcohol and other drugs?
E. What am I teaching others, including my students, about AODA with my words and actions?
F. What is my criteria for deciding to believe or reject AODA information?
G. How does my acceptance or rejection of AODA information influence my students' thinking on this topic?
H. What economic, cultural, and social factors promote alcohol and other drug abuse?
I. How do my family's and friends' views and practices regarding alcohol and other drugs affect my behavior?
J. What kinds of strategies can I use to help my students to be self-reflective on the influences in their lives regarding AODA concepts?
K. How do my views as well as the influence of my family's and friends' views and practices regarding alcohol and other drugs affect the way I deal with this issue in the classroom?

Effects of Alcohol and Other Drug Abuse

A. What effects do alcohol and other drugs have on the mind and body?
B. How does AODA affect family relationships?
C. How has other people's use of alcohol and other drugs affected me?
D. How does my alcohol and other drug use affect me and others?
E. What strategies can I use to help my students become more aware of their ability to reason?
F. What strategies can I use to make my students more aware of the impact of alcohol and other drugs on their ability to reason?
G. How can I model critical thinking and competent decision making for my students on this topic?

Rules About Alcohol and Other Drugs

A. How do I learn the rules in my life that govern alcohol and other drugs?
B. How do the rules that I hold for alcohol and other drugs compare to those that my students are learning from their family, friends, community, and society?
C. What do I believe are appropriate AODA rules for students in grades K-1? 2-4? 5-8?, 9-12?
D. How consistent are these rules with my students' perceptions and my school district's philosophy?

E. What is the basis of the school's, community's, and society's thinking that generated the current laws and policies for alcohol and other drugs?
F. In what ways are the rules I teach my students consistent or inconsistent with my actions as a teacher and an adult?
G. What are effective methods for communicating rules about alcohol and other drugs to students?

Keeping Safe From Alcohol and Other Drug Abuse

A. What skills and attitudes have I developed that help keep me safe and healthy and help promote the safety and health of others, including my students, in relation to AODA?
B. What support did I need to help me consistently develop and use these skills and attitudes?
C. How consistently do I support positive skills and attitudes in my students?
D. How consistently do I apply these skills and attitudes in AODA-related situations?
E. How does my ability to consistently apply positive skills and attitudes in AODA-related situations affect my students' ability to accept what I'm teaching as valuable for them?
F. What are effective methods for me to use to help my students practice skills and attitudes that will keep them safe from AODA?
G. As a teacher, how do I model empathy for others who are experiencing AODA problems?
H. What are appropriate skills regarding AODA to teach to students at the K-1, 2-4, 5-8, and 9-12 levels?
I. How does what I teach students about alcohol and other drugs influence their risk of
   - contracting the human immunodeficiency virus (HIV) or other sexually transmitted diseases?
   - having a child with fetal alcohol syndrome?
   - being involved in an unplanned pregnancy?
   - becoming a victim or perpetrator of sexual violence?
   - dropping out of school?
   - breaking the law?
J. How do I, as a teacher, model an advocate role for AODA programs?
K. What prevention information, attitudes, and skills do I know and consistently practice at school (with faculty, staff, parents, and students)?
L. How do I relate AODA prevention to health and safety in my own life?

Appendix J

Teaching For, Of, and About Thinking

by Arthur L. Costa

Reprinted with permission from *Developing Minds: A Resource Book for Teaching Thinking*. Arthur L. Costa, ed., Alexandria, VA: Association for Supervision and Curriculum Development, 1985, pp. 20-23.

Ron Brandt's editorial in the September 1984 issue of *Educational Leadership* is one of the most helpful organizers for the teaching of thinking I've found. He discusses a balanced, three-part program, which I interpret as follows.

Teaching For Thinking

Many authors and psychologists feel that children learn to think long before they come to school and that educators need to create the conditions for their natural, human inclination to think to emerge and develop. Indeed, Hart (1975) believes that schools are "brain incompatible." In their studies of creativity, Ghiselin and Gardner find that what young children do prior to entering school and what practicing scientists and artists do is more similar than anything that goes on in between.

Teaching for thinking simply means that teachers and administrators examine and strive to create school and classroom conditions that are conducive to children's thinking. This means that

- teachers pose problems, raise questions, and intervene with paradoxes, dilemmas, and discrepancies that students can try to resolve.
- teachers and administrators structure the school environment for thinking—value it, make time for it, secure support materials, and evaluate growth in it.
- teachers and administrators respond to students' ideas in such a way as to maintain a school and classroom climate that creates trust, allows risktaking, and is experimental, creative, and positive. This requires listening to students' and each other's ideas, remaining nonjudgmental, and having rich data sources.
- teachers, administrators, and other adults in the school environment model the behaviors of thinking that are desired in students.

Accomplishing all of the above alone would go far in encouraging students to use their native intelligence. However, there's more. Students haven't learned to think yet.

Teaching Of Thinking

Most authors and developers of major cognitive curriculum projects agree that direct instruction in thinking skills is imperative. Beyer, de Bono, Feuerstein, Lipman, and Whimbey would probably agree on at least one point, the teaching of thinking requires teachers to instruct students directly in the processes of thinking. Even Perkins believes that creativity can be taught—by design.

This does not mean that a curriculum program must be purchased, inserviced, and installed. While this is surely a viable option and should be considered, there are other ways of teaching students thinking skills: analyzing the subject areas or skills being taught in the normal curriculum for their prerequisite cognitive abilities and then teaching those skills directly, for example. The act of decoding in reading requires analysis, comparison, making analogies, inferring, synthesizing, and evaluating. Teaching of thinking, therefore, means that these cognitive skills are taught directly as part of the reading (decoding) program.

Critical thinking skills might be taught directly during a social studies unit on the election process. Steps in problem solving might be taught directly during math and science instruction. The qualities of fluency and metaphorical thinking might be taught directly during creative writing, and so forth. Creating conditions for thinking and teaching it directly are excellent procedures, but what about the application? Nothing yet has been taught about the transference of these thinking skills beyond the context in which they were learned. Students may be able to identify the steps in the problem-solving process and correctly distinguish between classification and categorization, but do they have any inclination to use these skills in real-life situations? There's more.

Teaching About Thinking

Teaching about thinking can be divided into at least three components: brain functioning, metacognition, and epistemic cognition.

Brain functioning. Recently neurobiological research has shed light on how our brains work. Teaching about thinking would include investigating such curiosities as: How do we think? How does memory work? What causes emotions? Why do we dream? How do we learn? How and why do mental disorders occur? What happens when part of the brain is damaged? Restak's *The Brain,* Ornstein and Thompson's *The Amazing Brain,* and Russell's *The Brain Book* are sources of information. A recent public television series entitled *The Brain* has heightened this awareness and is available for use in schools.

Metacognition. Being conscious of our own thinking and problem-solving while thinking is known as metacognition. It is a uniquely human ability occurring in the neocortex of the brain. Good problem solvers plan a course of action before they begin a task, monitor themselves while executing that plan, back up or adjust the plan consciously, and evaluate themselves upon completion.

Metacognition in the classroom might be characterized by having discussions with students about what is going on inside their heads while they're thinking; comparing different students' approaches to problem solving and decision making; identifying what is known, what needs to be known, and how to produce that knowledge; or having students think aloud while problem solving.

Metacognition instruction would include learning how to learn; how to study for a test; how to use strategies of question asking before, during, and after reading. It might include knowing how to learn best—visually, auditorily, kinesthetically—and what strategies to use when you find yourself in a situation that does not match your best learning modality.

Metacognition is discussed more extensively later in this book. See also Costa (1984).

Epistemic cognition. Epistemology is the study of how knowledge is produced. In the curriculum it might include studying the lives, processes, and works of great composers, artists, scientists, and philosophers. Epistemological questions for discussion include

- How does what scientists do differ from what artists do?
- What are the procedures of inquiry used by anthropologists as they live with and study a culture?
- What goes on inside a maestro's mind as he or she conducts an orchestra?
- What was it about Mozart's genius that allowed him to "hear" a total musical composition before writing it down?
- What process do poets use to create?
- Why can't we use processes of scientific inquiry to solve social problems?

Epistemic cognition is the study and comparison of great artists, scientists, and scholars and the differential processes of investigation, inquiry, and creativity that underlie their productivity. Lipman's Philosophy for Children program is especially well-suited for this. Other resources include Perkins' *The Mind's Best Work,* Madigan and Elwood's *Brainstorms and Thunderbolts: How Creative Genius Works,* and Gardner's *Art, Mind, and Brain.*

Installing a Program for Thinking

Installing a program of teaching for thinking does not happen overnight. It takes time, patience, and practice. Joyce and others have created a helpful paradigm for thinking about the steps and sequences in staff development efforts. They suggest a series of stages and levels of concern through which teachers proceed during the change process. Their procedure includes inservice techniques that help teachers raise their skill development levels in using new skills and behaviors.

The matrix for staff development presented below combines two components—teaching for, of, and about thinking and the levels of skill development. The graphics on pages 139 and 140 provide examples of teacher competencies, skills, and knowledge as indicators of what might be included at each intersection in the matrix. Please consider these examples merely as helpful starting points to which you can add your own indicators of competence.

Staff Development Matrix for Thinking Skills

Levels of Skill Development	**I. Teaching For Thinking:** Creating school and classroom conditions conducive to full cognitive development.	**II. Teaching Of Thinking:** Instructing students in the skills and strategies directly or implementing one or more programs.	**III. Teaching About Thinking:** Creating school and classroom conditions conducive to full cognitive development.
A. Awareness Developed by lectures, readings, witnessing demonstrations, and so on.	I A	II A	III A
B. Knowledge and Comprehension Developed by modeling, practicing, comparing, discussing, interacting.	I B	II B	III B
C. Mastery of Skills Developed by practicing with feedback and coaching.	I C	II C	III C
D. Application Developed by extended use across subject areas, varieties of groups, demonstrations; critique and dialogue with others.	I D	II D	III D
E. Trainer of Trainers Developed by creating, conducting, and critiquing inservice strategies; observing the training of other trainers.	I E	II E	III E

Teaching FOR Thinking

Intersection	Competencies of Teachers
I A	Is aware of different levels of questions and various ways of organizing the classroom for instruction. Can describe alternative ways of responding so as to maintain and extend students' thinking.
I B	Plans lessons to incorporate levels of questions, response behaviors, and classroom organization for thinking. Seeks assistance and advice from others in methods and materials for teaching thinking.
I C	Invites others to observe a lesson, then to give feedback about questioning skills, classroom organization, and response behaviors. Volunteers to do the same for colleagues.
I D	Incorporates thinking skills across subject areas. Devotes maximum time to teaching for thinking. Shares ideas and materials with colleagues. Strives to model rational thinking processes in own behavior.
I E	Conducts inservice for colleagues. Videotapes own lessons and shares with colleagues. Plans, conducts, and evaluates staff development strategies. Analyzes school and classroom conditions for their conduciveness to and modeling of thinking. Works to improve them.

Teaching OF Thinking

Intersection	Competencies of Teachers
II A	Is aware of various programs intended to teach thinking directly. Is aware of definitions and distinctions among various thinking skills and strategies.
II B	Employs lessons intended to directly teach thinking skills. Incorporates thinking skills into content areas. Attends training in a curriculum program intended to teach thinking directly.
II C	Invites others to observe and give feedback about lessons in which thinking is taught directly. Applies knowledge learned in training programs to instruction. Devotes two to three hours per week to teaching thinking directly.
II D	Distinguishes among several major curricula intended to teach thinking. Diagnoses students' cognitive deficiencies and provides experiences to remediate them. Analyzes the cognitive skills prerequisite for students to master school subjects, and incorporates instruction in those skills.
II E	Develops and implements inservice training in one or more of the major curriculum programs. Trains others in the development of lesson plans incorporating direct instruction of thinking skills and strategies. Surveys and recommends adoption of instructional materials that enhance thinking skills.

Teaching ABOUT Thinking

Intersection	Competencies of Teachers
III A	Is aware of differences in modality strengths, learning styles, and brain functioning. Can define such terms as metacognition and epistemology.
III B	Attempts metacognitive discussions with students. Discusses how the brain works. Selects materials on brain functioning and biographies of famous scientists and artists in an attempt to intrigue students.
III C	Invites colleagues to observe a lesson involving a philosophical/epistemological discussion and seeks feedback as to ways to improve. Reads and attends courses and lectures, watches video programs on philosophy, cognition, brain functioning, and so on. Discusses differences in learning strengths and modalities with students.
III D	Selects materials and conducts lessons in which comparisons are made of strategic reasoning, knowledge production, and creativity. Discusses with students such topics as artificial intelligence, the analysis of propaganda, and strategies of learning. Models metacognition overtly in the presence of students.
III E	Develops, conducts, and evaluates inservice strategies for colleagues for instruction on brain functioning, learning style differences, and metacognition. Develops curriculum incorporating materials and learning activities intended to have students learn to think and learn about thinking. Designs assessment tools and techniques to gather evidence of students' growth in intelligent behaviors.

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Guidelines for Curriculum Presentation

Taken from *Drug-Free Schools and Children: Policymaker's Handbook*. Rockville, MD: Americal Council for Drug Education, 1990, p. I-6.

Drug prevention education should emphasize

- that most youths do not use drugs;
- that students should not be separated or grouped according to whether they may be using drugs;
- that information about drugs not be sensationalized; and
- that students help themselves and their communities by staying drug free.

Written and audiovisual materials used in drug prevention programs should, at a minimum, include the following:

Clear and unequivocal messages that illegal drug use is wrong and harmful for everyone. Illegal drug use includes

- use of legally prohibited drugs such as marijuana, cocaine, PCP, and "designer drugs;"
- use of prescription drugs such as tranquilizers or diet pills for purposes other than as prescribed;
- use of substances such as glues or aerosols that can be inhaled to produce drug-like effects; and
- use of legal drugs including alcohol and tobacco by legally underage persons.

A clear message that *any* drug use involves risk. Consuming even small amounts of some drugs can pose hazards to one's health and well-being. There should be no mixed messages about the risks of drug use. It is not safe, for example, to try a drug "just once."

Up-to-date and scientifically accurate information. Materials more than three to four years old should be reviewed carefully. Alcohol and other drug research is advancing rapidly and altering our knowledge about drugs and their effects on a continual basis.

Information that is appropriate for the developmental age, interests, and needs of students. Prevention messages and activities geared toward appropriate developmental stages are more likely to have an effect. Research has shown that targeting drugs individually is critical because the reasons for each drug's use varies greatly. Also, prevention messages should be introduced and taught frequently *before* the pressure for the drug's use begins.

Information that reflects an understanding of cultural diversity. Materials should be sensitive to students' cultural and ethnic backgrounds and should not further harmful stereotypes.

In addition, the following should be avoided:

Material that provides opportunities for students to make excuses about their behavior. Young people should understand they are responsible for their own decisions and that they will be held accountable for the consequences of those decisions.

Material that includes illustrations or dramatizations that could teach youths how to obtain, prepare, or consume illegal drugs. Photographs or videos used with prevention depict scenes of actual drug use.

Material that uses recovering addicts or alcoholics as role models. The power of confession might be useful in drug intervention programs that offer counseling to drug-using students or adults, but it often has the opposite effect on youths who are not using drugs. Material that features recovering addicts implicitly conveys the message to children that a drug user survived and perhaps even became famous or wealthy.

Material that uses terms such as social use, responsible use, controlled use, use/abuse; or that describes mind-altering drugs a mood-altering drugs (implying only temporary harm). Many pro-drug publications falsely imply that there is a "safe" use of mind-altering drugs. Or, they may imply that there are no "good" or "bad" drugs, just improper use of drugs. Material should be examined carefully to ensure that it contains no contradictory messages.

Material that teaches drug use is a child's own decision. Using an illegal or potentially life-threatening substance should not be held out as a decision for children to make.

Sex Equity in Curriculum Materials

Taken from *Wisconsin Model for Sex Equity in Career and Vocational Education.* Madison, WI: Wisconsin Department of Public Instruction, 1990, pp. 118-119.

Directions: Use this checklist to determine the degree to which sex bias is present in curriculum materials. These questions apply to the language and visuals used in both print and nonprint materials. If you answer "no" in any category, the material is biased; you should replace the material if possible or develop handouts to supplement the material and discuss it with your students. Before purchasing new material, use this checklist to determine the appropriateness of the purchase.

	Yes	No	N/A*
1. Are occupations shown open to all?	❑	❑	❑
2. Are sex-free titles used, as indicated in the current *Dictionary of Occupational Titles*?	❑	❑	❑
3. Are females and males depicted in occupations currently dominated by other sex (nontraditional occupations)?	❑	❑	❑
4. Are females and males portrayed in both active and passive roles throughout in approximately the same numbers?	❑	❑	❑
5. Are various races and ethnic groups presented throughout in a balanced or representative fashion?	❑	❑	❑
6. Are females and males shown to have all human traits?	❑	❑	❑
7. Do females and males appear in approximately the same number throughout the materials?	❑	❑	❑
8. Are females and males pictured performing a variety of home tasks that are not necessarily traditional for their sex?	❑	❑	❑
9. Are gender-free, plural pronouns used? Is there an equal balance of gender-specific, singular pronouns? Are gender-free nouns substituted for gender-specific pronouns?	❑	❑	❑
10. Are both minority and nonminority females and males pictured equally in varied levels of occupational status and responsibility?	❑	❑	❑

*N/A=Not Applicable

	Yes	No	N/A*
11. Do illustrations of people include a variety of body types along with evidence of handicaps/disabilities?	❑	❑	❑
12. Is written reference made to physical appearance only when there is a legitimate purpose for the reference?	❑	❑	❑
13. After reviewing this material, do you come away with a sense that females and males of various ethnic and racial backgrounds, some with handicaps, are involved in a variety of occupations, with a variety of responsibilities, and that opportunities are not limited on the basis of gender, race, or handicaps?	❑	❑	❑

14. Comments/recommendations

Forms of Bias in Curricular Materials and the Classroom

Taken from *A Guide to Curriculum Planning*. Madison, WI: Wisconsin Department of Public Instruction, 1985, p. 68-70.

The major influences on the academic achievement of children are curriculum content and materials, the learning environment, and the types of expectations, interactions, and behaviors to which students are subjected. Six of the prevalent forms of bias in curriculum materials[1], environment, and interactions in the classroom[2] are described below.

Invisibility

Certain groups have been underrepresented in curricular materials. The significant omission of women and minority groups has become so prevalent as to imply that these groups are of less value and importance in American society. Girls have stayed quietly in the background while boys played the more active roles in the classroom.

Teachers interact far more frequently with boys—rewarding them for their academic work, punishing them, talking to them, questioning them—and, years later, teachers remember boys far mor often than they do girls. Invisibility has been underscored by discussion topics, bulletin boards, and displays which frequently have omitted women and minority groups entirely.

Stereotyping

By assigning traditional and rigid roles or attributes to a group, instructional materials stereotype and limit the abilities and potential of that group. Stereotyping denies students a knowledge of the diversity, complexity, and variety to be found among any group of individuals. Children who see themselves portrayed only in stereotypic ways may internalize these stereotypes and fail to develop their unique abilities, interests, and full potential.

Often teachers have assumed that the male half of the species shares one set of abilities, interests, values, and roles, and the female half a different set. These stereotyped expectations ignore individual differences, affect the teacher's behavior, and serve to limit the full develop of male and female students. Teachers often reward boys for active, assertive, curious behavior, while rewarding girls for appreciative, dependable, and considerate behavior.

When these stereotyped teacher expectations are reinforced by stereotyped models, pictures, and other displays, many children learn to limit their careers and capabilities in order to fit these stereotyped roles.

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[1] Developed/adapted from *Sex Equity Handbook for Schools*, Sadker, Myra Pollack and David Miller Sadker. New York: Longman, 1982.

[2] Compiled from *Implementing Title IX and Attaining Sex Equity: A Workshop Package for Elementary-Secondary Educators*, McCune, Shirley and Martha Matthews, eds. Prepared for the Title IX Equity Workshops Project of the Council of Chief State School Officers by the Resource Center on Sex Roles in Education. Washington, DC: U.S. Department of Health, Education and Welfare, 1978.

Imbalance / Selectivity

Textbooks perpetuate bias by presenting only one interpretation of an issue, situation, or group of people. This imbalance denies students knowledge of other possible interpretations. Selective presentation of materials in textbooks has often distorted reality and ignored complex and differing viewpoints. As a result, millions of students have been given little or no information about the contributions, struggles, and participation of women and minorities in American society.

This imbalance is also reflected in compensatory education programs. Special education has tended to alleviate learning problems which affect boys and ignore those which hamper girls. For example, there are special education programs for reading and emotional learning problems, but few for problems with spatial relationships and mathematics. By affecting the types of learning problems recognized and remedied, sex bias has worked to the disadvantage of females.

Unreality

Textbooks have frequently portrayed United States history and contemporary American life experience unrealistically. Controversial topics have been glossed over, and discussions of discrimination and prejudice have been avoided. Unrealistic coverage denies children the information they need to recognize, understand, and perhaps some day conquer the problems that plague American society.

In spite of the many reinforcements of sex bias found in the classroom, most teachers and teacher educators are unaware of them and of the roles they play in promoting educational inequality. To remedy inequalities, educators must become aware of their own patterns and attempt to provide response opportunities, offer feedback, and interact informally in ways that affirm the existence and value of all members of society.

Fragmentation / Isolation

By separating minority and women's issues from the main body of the text, instructional materials imply that these issues are less important than and not a part of the cultural mainstream. By arbitrarily separating boys and girls in classroom procedures such as lining up, the formation of work groups, and the organization of recreational activities, teachers promote the fragmentation and artificial isolation of the sexes. Purposeless separation serves as a divisive influence and distracts from the goal of sexual equality.

When, in addition, the roles and contributions of women are represented in the physical environment of the classroom, on bulletin boards, and in other displays as separate or secondary, the impression given is that female experience is only a corollary to the mainstream of human existence.

Linguistic Bias

Curricular materials reflect the discriminatory nature of our language. Masculine terms and pronouns, ranging from *forefathers* to the generic *he,* have denied the participation of women in American society. Further, occupations are given masculine labels, such as *mailman,* that deny the legitimacy of women working in these fields. Imbalance of word order and lack of parallel terms that refer to females and males are also forms of linguistic bias.

The same forms of language bias which emerge in instructional materials may also emerge in the language of the classroom. Sex-biased words such as *mankind* and *salesman,* and the constant reliance on the male pronoun *he* to refer to both males and females, are

examples of sexist language patterns which belittle the role and importance of females. As in the other cases of bias, the physical displays in the room may also reflect sexist messages, in this case, biased language.

A "quick check" follows which can facilitate a cursory self-assessment and consideration of specific areas for improvement. More detailed resources, assessment materials, and inservice strategy suggestions are available. Educators are encouraged to assess their areas of responsibility, review materials for content and form, evaluate their environment, and become aware of their patterns of interaction with others.

Appendix N

Forms of Bias/Quick Check*

Taken from *Wisconsin Model for Sex Equity in Career and Vocational Education*, Madison, WI: Wisconsin Department of Public Instruction, 1991, p. 113.

	Check Below				
	Always	Often	Sometimes	Never	N/A**
Expectations. I have the same behavioral and achievement expectations for males as for females.	❑	❑	❑	❑	❑
Duties. I assign females and males to duties and responsibilities on the basis of ability rather than gender.	❑	❑	❑	❑	❑
Language. I use nonsexist language; for example, I do not refer to all doctors or lawyers as "he," or all nurses or secretaries as "she."	❑	❑	❑	❑	❑
Attitude. I take the idea of equality seriously; for example, I do not put down males or females or joke about their abilities, roles, or ethnic backgrounds.	❑	❑	❑	❑	❑
Environment. All bulletin boards and visual materials are nonsexist and nonracist, showing men and women in a variety of roles that reflect the many interests of both.	❑	❑	❑	❑	❑
Curriculum. I ensure that school curriculum is nonsexist; for example, I plan for a curriculum that • addresses the needs and interests of both girls and boys; • recognizes the contributions of both sexes; • provides for the equal treatment of both sexes in all subject areas; and • helps boys and girls explore the wide range of roles and career options available to them.	❑	❑	❑	❑	❑

Mark the continuum.

Basically sex fair	Need some improvement	Need much improvement

Consider your rating. List something specific you could do to help achieve sex equity in your area(s) of responsibility.

* Items adapted from surveys developed by E.I. Newcombe and published in *The Tredyffrin/Eastown Program Stage One Manual: Preparing for Change*. Washington, DC: Women's Educational Equity Act Program, U.S. Department of Education, 1979.

** N/A= Not Applicable

Neutralizing Ethnocentric and Sexist Materials*

Taken from *A Guide to Curriculum Planning.* Madison, WI: Wisconsin Department of Public Instruction, 1985, p. 75.

Skilled teachers can find many ways to neutralize ethnocentric and sexist materials in the classroom. Here are a few suggestions.

- Work out guidelines on ethnocentrism and sexism with the class, so that the students can evaluate the materials they use. This encourages students to think critically and analytically rather than accept every statement at face value.
- Hold class discussions of statements or situations in textbooks. Are they realistic? Why or why not?
- Collect nonsexist supplementary materials from periodicals, newspapers, library books, paperbacks, government agencies, private foundations, museums. Use such media as photographs, records, tapes, works of art, films, and videotapes.
- Set aside a time for children's presentations on "Blacks in the News," "Women in the News," "Latinos in the News," and so on.
- Ask students to fill in the information missing from history or social studies texts. Reproduce the materials they create.
- Discuss desirable and undesirable *human* characteristics.
- Ask the class to gather statistics on the occurrence of various family structures—and on mothers' employment outside the home—in the nation or in the community. Compare these with the occurrence of these family structures in readers, anthologies, and library books.
- Ask students to compose descriptions or make collages on the ideal woman and ideal man as presented in communications media, or on the typical woman and typical man. Discuss whether it's desirable to be like any of these images. Give reasons.
- Ask history or economics students to examine how the social conditions of ethnic groups and/or women in any given time and place affect their entry into the labor market.
- Ask students to analyze racism and sexism in popular songs, jokes, the district's personnel directory, TV cartoons, children's rhymes, nursery stories, and toys and toy packaging.

You and your staff will probably develop many more ideas for classroom use. Confronting ethnocentrism and sexism in materials will help spare students the damage sex and race stereotypes do. Teaching students to use experience and research to weigh the truth of communications helps prepare them to live wisely. By doing both, you give them the chance to become stronger, more responsible human beings.

*Adapted from "Sex Equality in Educational Materials." *AASA Executive Handbook Series* #4, Arlington, VA: American Association of School Administrators, April 1975.

Appendix P

Self-Reflection on Your Teaching: A Checklist

by John Barell

Reprinted with permission from *Developing Minds: A Resource Book for Teaching Thinking*. Arthur L. Costa, ed., Alexandria, VA: Association of Supervision and Curriculum Development, 1985, pp. 315-316.

Using a scale of 1 to 5, rate your classroom and school according to the following items.

5 = Very Often 4 = Often 3 = Sometimes 2 = Seldom 1 = Hardly Ever

Classroom

1. When students pose unusual or divergent questions, I ask, "What made you think of that?"	5	4	3	2	1
2. Whatever the text says is accepted as the right answer.	5	4	3	2	1
3. When a decision has to be made between involving the class in a discussion of an intriguing student idea (topic related) or moving on to "cover" content, I choose the latter.	5	4	3	2	1
4. I encourage students to seek alternative answers.	5	4	3	2	1
5. Students give reasons for making statements.	5	4	3	2	1
6. I use subject matter as a means for students to generate their own question (or problems), which we then seriously consider.	5	4	3	2	1
7. When teaching, I sit or stand behind my desk.	5	4	3	2	1
8. Most questions posed during class can be answered with short or one-word answers.	5	4	3	2	1
9. Students spontaneously engage in critiquing each other's thinking.	5	4	3	2	1
10. Students relate subject matter to experiences in other subjects or in their personal lives.	5	4	3	2	1
11. I stress *what* to think, not *how*.	5	4	3	2	1
12. Students often set objectives for their own learning.	5	4	3	2	1
13. Students spend time working collaboratively to solve subject matter questions.	5	4	3	2	1
14. One focus in my classroom is trying to understand how and why people (mentioned in texts) created ideas, solutions, experiments, rules, principles, and so on.	5	4	3	2	1
15. My classroom mirrors the patterns of involvement practices in most faculty meetings.	5	4	3	2	1
16. Students actively listen to each other.	5	4	3	2	1

School

17. We talk about the nature of thinking.	5	4	3	2	1
18. My school stresses collaborative instructional problem solving.	5	4	3	2	1
19. I learn from my colleagues by observing their teaching.	5	4	3	2	1
20. My supervisor and I discuss how to challenge students to think in more complex fashions.	5	4	3	2	1

Hints on How to Assess Student Achievement

Adapted and reprinted with permission from *Logical Reasoning in Science and Technology, Teacher's Guide.* Glen Aikenhead, Rexdale, Ontario: John Wiley and Sons Limited, 1991, pp. 30-33.

Question Difficulty: Bloom's Taxonomy and Logical Reasoning in Science and Technology

Benjamin Bloom's taxonomy of educational objectives is a convenient device for talking about student assessment. The degree to which students have attained your objectives is systematically worked out in Bloom's taxonomy. The discussion here on the taxonomy is only a summary. For a more complete treatment of the topic, consult a methods book or a text on student evaluation.

There are six categories to the taxonomy.

- knowledge
- comprehension
- application
- analysis
- synthesis
- evaluation

At the lower end of the taxonomy (the "knowledge" level), students demonstrate an awareness of terms or ideas by recognizing or recalling them. At the upper end of the taxonomy (the "evaluation" level) the task is far more sophisticated. Students must respond to material that they have never seen before by analyzing it in terms of a set of criteria that students themselves make explicit in their answers. Students conclude their answers by making a judgment on how closely the material matches the criteria. The categories in between "knowledge" and "evaluation" have rather distinctive characteristics.

The "comprehension" level is likely very familiar to teachers. At this level, students put an idea into their own words or do a problem that is similar to those problems practiced in class or for homework. (If students memorized the answer to a particular problem—and some students do—then the test question would be classified as a "knowledge" level question.)

At the "application" level, students apply their understanding of a concept to a new situation or system. (If the situation were familiar to students because it had been addressed in class, then the test question would be a "comprehension" level question.) An "application" question requires students to use their personal understanding of a concept, rather than their memorized understanding; obviously, an "application" question is much more difficult and challenging. When confronted with an "application" question, there is often a student who complains, "We didn't do this in class!" More often than not, a teacher discovers that an "application" question inadvertently elicits students' preconceptions (common-sense conceptions or misconceptions), rather than the conception taught in class. In other words, by responding correctly to an "application" question, students demonstrate a deeper understanding of the subject matter than by responding correctly to a "knowledge" or "comprehension" question.

The upper three levels of Bloom's taxonomy ("analysis," "synthesis," and "evaluation") all deal with new situations. If students were asked to do a task familiar to them (analyzing a graph that you carefully analyzed in class, for instance), they would be engaged in a "comprehension" level task. It is amazing, however, how students can honestly not recognize the familiarity that teachers see as obvious. Thus, you'll find that a question you believe is at the "comprehension" level because of its blatant similarities to examples done in class is not recognized by students as being familiar, and therefore is completed by students using basic principles, thereby rendering the question an "analysis" question.

Typical "analysis" questions get students to break down a new situation conceptually into parts, according to the idea being tested (for example, finding the statements in a news clipping that represent some of the criteria for making a scientific decision). Typical "synthesis" questions require students to design an experiment or show a relationship between two concepts—a relationship new to the student.

Some examples will clarify Bloom's taxonomy further.

- "Define epidemiology."—*Knowledge* level, assuming an exact replication of a definition is required.
- "What is epidemiology?"—*Comprehension* level, because the student paraphrases a definition.
- "How would you make a 5% solution of sugar?—*Application* level, but if students recognize the situation as being similar to problems practiced in class, then it's at the *Comprehension* level.
- "Identify the premises and conclusion in the following argument . . ."—*Analysis* level, assuming students have not analyzed that argument before.
- "Write a paragraph that argues against believing in a flat earth. Your paragraph should clearly illustrate the four ideas that guide a scientific decision."—*Synthesis* level, because a product must be put together in a way that uses the idea being tested.
- "Read the passage that describes a scientist's work. Is the work an example of epidemiology or etiology? Give your reasons."—*Evaluation* level, assuming that (a) the passage is new to students, (b) they provide the criteria defining epidemiology and etiology, (c) they relate the passage's content to those criteria, and (d) they make the logical judgment on whether the work is epidemiology or etiology.

Teachers who use open-book tests will invariably use test items categorized at the "application" level and above. These are difficult tests and students really need to know their stuff. Some teachers prefer to use closed-book quizzes and ask predominantly "knowledge" and "comprehension" questions, and save the higher level questions for assignments and unit tests.

When engaging students in a discussion, you can probably get the discussion off to a good start by asking quick "knowledge" questions and then moving to an "analysis" or "evaluation" question.

Different Types of Assessment

There is a wide range of techniques that can help you assess the degree to which students have attained your objectives. Techniques include: quizzes, tests (written or oral, closed-book or open-book, or a combination), homework checks, lab reports, checklists, concept mapping, and projects of various sorts.

Many teachers ask, "How do you assess students when they participate in a class discussion or a simulation?" There are two complementary approaches. One is to assess the competency of the student's preparation to participate in the discussion or simulation. A

quick homework check will reveal whether or not a student has come prepared with written material ready to contribute. If you have the time, you may wish to have students hand in their preparation so you can evaluate its quality. An example of a marketing system for such an assignment is the following three-point system: three points for meeting your expectations, two points for a good attempt but falls short in some important way, one point for an honest attempt but off the mark, and zero pints for not trying. (If you already have your own system, use it.) You do not have to take in every student's work each time. Over a period of a month, you may get around to assessing every student's work once, but on different occasions.

The second approach to assessing class discussions or simulations is to make students responsible for learning the facts, concepts, and skills that are part of the discussion or simulation, and then test the students later on a quiz or exam.

Different activities have different objectives. Some activities get students to explore phenomena or ideas, rather than come to a definitive conclusion. For those activities, you would assess how well students explored. (Again, a three-, four-, or five-point scale could work as a way to score a student's performance.) Double check, however, that your assessment of a student's report is consistent with the objectives of that activity.

Sometimes students work in groups to complete a task. You can assess the quality of the product produced by the group and give that grade to each member of the group, provided that you are certain that each group member did his or her fair share of the work. Groups tend to work better when they know that together they will do better on your assessment of their work. Deal with individuals who are not pulling their weight before the product is handed in.

A particularly useful assessment technique is the checklist. It is a continuous evaluation device on which you put a check mark beside a student's name whenever you observe that student doing or saying something important. (The actual moment you record the check mark usually comes after class.) Behavior that you deem important is listed on your checklist. These checklist items apply throughout the course. Thus, you make up one checklist for the whole year, though you may want to modify it. Here are some examples of items that could appear on a checklist.

- records observations carefully
- asks intriguing/novel questions
- critically questions an idea or information
- suggests an insightful idea
- notes a discrepancy
- applies ideas to everyday life
- shows initiative in consensus making
- brings relevant news items to class
- expresses open mindedness
- expresses curiosity
- helps other students to succeed

It is not wise to have a list that extends to more than 15 or 20 items. Compose your own checklist by writing items that (1) correspond to your goals for the course, (2) are not evaluated by other techniques you use, (3) describe—not evaluate—student behavior, and (4) are organized in a way that makes sense to you.

A checklist is two dimensional, with a list of items down one side and a list of students across the other side (see the sample on page 154).

Format of a Typical Checklist

	Student A	Student B	•	•	•	•	•	Student Z
Item 1								
Item 2								
Item 3								
etc.								
Item 17								

To make a checklist work efficiently, put the list of items on one sheet of paper or a card, and the students' names across the top of another page. After class, review in your mind what happened in class and make appropriate check marks. At the end of three to five weeks of instruction, you will have hard evidence of what students have done. Before this time is finished, you will notice that the quieter students tend to have fewer check marks. Compensate for their quiet nature by engaging them personally at appropriate times so you can give them the check marks they deserve. Such engagements are not oral exams because you do not put Xs beside their name, only checks. Students know that you are looking for evidence of what they do, not what they cannot do. Students generally feel that the checklist system is positive and supportive. By letting students know what your checklist items are, you are clarifying some of your main objectives for students.

A comment about the difference between scoring and evaluating is appropriate at this point. Assessing student performance is actually a two-step process (similar to observing/interpreting): (1) scoring—writing down a number that relates to an arbitrary scale corresponding to the quality of the performance and (2) evaluating that score in terms of your own criteria of what is excellent, good, fair, or poor, given the circumstances and your expectations. For instance, a quiz score of 5 out of 15 can be interpreted as being excellent if it happens to be the top score of the class (it was a very difficult and perhaps poorly composed quiz), or it can be interpreted as poor if most students scored near the 15 point mark. The process of interpreting a score is the process of evaluation.

The check marks on a checklist are your observations of student behavior. These checks are similar to a score on a student's quiz. The check marks still need to be interpreted. The last step in using a checklist is the interpretation of those observations so you can put a grade on a report card. This process of evaluating students from a checklist engages you in some explicit subjectivity (as opposed to implicit subjectivity inherent in other forms of assessment). Be consistent in your judgments. Because your subjective decision is based on hard evidence, students and parents generally accept the results very well.

Influences on AODA Conceptualization

A. What experiences have I had that influenced my beliefs about AODA?
B. What am I teaching others, including my children, about AODA with my words and actions?
C. What beliefs about AODA do I hold that may be biased or stereotyped?
D. What are my beliefs about alcohol and other drugs?
E. How do my beliefs, including stereotypes and biases, influence my behavior regarding alcohol and other drugs?
F. For whom am I a valued source of AODA information and influence?
G. What is my criteria for deciding to believe or reject AODA information?
H. How does my acceptance or rejection of AODA information influence my child's thinking on this topic?
I. What economic, cultural, and social factors promote alcohol and other drug abuse?
J. To what extent are tobacco, alcohol, and other drugs a part of my community?
K. To what extent are tobacco, alcohol, and other drugs present in my family?
L. How do my family's and friend's views and practices regarding alcohol and other drugs affect my behavior and my children's behavior?

Effects of Alcohol and Other Drug Abuse

A. What effects do drugs have on the mind and body?
B. When might the bad effects of alcohol and other drugs seem good to a person?
C. How has other people's use of alcohol and other drugs affected me?
D. How does alcohol and other drug abuse affect family relationships?
E. What effects of alcohol and other drugs signal misuse, abuse, or dependency?
F. How do parents' choices regarding alcohol and other drugs affect their children?
G. How does my alcohol and other drug use affect others?
H. How does alcohol and other drug addiction affect a person's style of thinking or ability to think?
I. How are these effects on thinking addressed in treatment and recovery?
J. How can I model critical thinking and competent decision making for my children on this topic?

Rules About Alcohol and Other Drugs

A. What rules exist for my children regarding foods, medicines, poisons, and drugs?
B. What are similarities and differences in the rules set by myself, my family, my friends, my school, and my community regarding alcohol and other drugs?
C. What criteria do I use to label rules related to alcohol and other drugs and the consequences for my children as fair or unfair?
D. How do the consequences I set for my children regarding rules related to alcohol and other drugs change as they get older?

E. Are there spoken as well as unspoken rules related to alcohol and other drugs in my family?
F. In what ways are the rules I've set for my children consistent or inconsistent with my actions as a parent and adult?
G. What criteria do I use to set rules related to alcohol and other drugs for myself?
H. How do the criteria I use to set rules for myself compare to the criteria I use to set rules for my children?
I. Do my rules about alcohol and other drugs affect others positively or negatively, or do they have mixed effects?
J. What is the basis of the school's, community's, and society's thinking that generated the current laws and policies related to alcohol and other drugs?
K. If rules, laws, and policies related to alcohol and other drugs are proven unfair, what is the appropriate response for individuals and society?

Keeping Safe From Alcohol and Other Drug Abuse

A. What people, programs, and organizations in the schools and community help people who have AODA-related problems?
B. What personal skills do my children have, or need to develop, to stay away from unsafe and unhealthy risks?
C. What skills and attitudes am I helping my children practice to keep them and help others keep safe from AODA?
D. What groups, individuals, or organizations can help me assess my risk or others' risk for AODA?
E. How strong is my ability, my friends' abilities, and my family's ability to make safe choices regarding alcohol and other drugs?
F. What skills and attitudes have I developed that help keep me safe and healthy and help promote the safety and health of others, including my children, in relation to AODA?
G. How consistently do I apply these skills and attitudes in AODA-related situations?
H. What kind of support do I need to help me consistently use these skills and attitudes?
I. How does the presence or absence or these skills and attitudes affect my child's risk of
   - contracting the human immunodeficiency virus (HIV) or other sexually transmitted diseases?
   - having a child with fetal alcohol syndrome?
   - being involved in an unplanned pregnancy?
   - becoming a victim or perpetrator of sexual violence?
   - dropping out of school?
   - breaking the law?
J. How can I foster positive skills and attitudes in my children and others?
K. What social systems exist to
   - develop positive skills and attitudes in citizens?
   - help those with AODA-related problems?
L. How can my family become advocates for AODA programs?
M. What prevention information, attitudes, and skills do I know and consistently practice at home and work?
N. How do I relate AODA prevention to health and safety in my own life?

Parent Consent Requirement

Taken from *Drug-Free Schools and Children: Policymaker's Handbook*. Rockville, MD: American Council for Drug Education, 1990, p. VI-1.

The Protection of Pupil Rights Amendment (PPRA) and the implementing regulations, the Students Rights in Research, Experimental Activities, and Testing (34 CFR, Part 98), are intended to ensure greater opportunity for parents to participate in their children's education. These authorities, which apply to programs funded by the U.S. Department of Education (ED), protect the rights of parents and students in two ways. First, all instructional material which will be used in connection with any ED funded research or experimental program must be made available for inspection by parents. Second, no student shall be required under an ED funded program to submit without prior parental consent to any testing or treatment designed to elicit information which will affect attitudes or beliefs if the primary purpose is to reveal any of the seven listed categories of personal information.

- political affiliation
- mental and psychological problems potentially embarrassing to the student or his or her family
- sexual behavior and attitudes
- illegal, antisocial, self-incriminating, and demeaning behavior
- critical appraisals of other individuals with whom the student has close family relationships
- legally recognized privileged and analogous relationships, such as those of lawyers, physicians, and ministers
- income, other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under a program

Appendix T

Comprehensive AODA Program Checklist

I. IMPLEMENTATION AND INTEGRATION					
Criteria	Degree Criterion is Met. *Circle* appropriate number.				
	Yes	To Some Degree			No
1. Student use and attitude survey has been conducted within the past three years.	4	3	2	1	0
2. Ongoing informal/formal appraisal conducted on a regular basis.	4	3	2	1	0
3. Staff, students, and community informed of appraisal.	4	3	2	1	0
4. Records are kept for evaluation of program.	4	3	2	1	0
5. Advisory committee formed with broad community and school representation.	4	3	2	1	0
6. District has an Alcohol and Other Drug Abuse (AODA) policy for students that emphasizes nonuse and provides avenues for referral and assistance.	4	3	2	1	0
7. District has an AODA policy for employees that provides avenues for referral and assistance.	4	3	2	1	0
8. Policies were developed with input from school and community personnel.	4	3	2	1	0
9. Policies are clearly communicated to staff, students, and parents on an annual basis.	4	3	2	1	0
10. District has developed a long-range plan for comprehensive AODA programs which include training and release time.	4	3	2	1	0
11. District has an AODA coordinator with adequate release time.	4	3	2	1	0
12. AODA program is integrated with other school programs such as At Risk, School Age Parents, and academic subjects.	4	3	2	1	0
13. AODA program is integrated with outside agencies such as law enforcement, social services, justice, etc.	4	3	2	1	0
II. PROGRAMS FOR STUDENTS/COLLATERAL PROGRAMS FOR ADULTS					
1. Parents are provided educational opportunities for learning about AODA.	4	3	2	1	0
2. District offers general awareness programs to the community, staff, students, and parents.	4	3	2	1	0
3. District has ongoing parent programs.	4	3	2	1	0
4. Parents have an active role in implementing some components of the AODA program.	4	3	2	1	0
5. District has an Employee Assistance Program.	4	3	2	1	0
6. District has peer programs such as peer helpers, peer educators, etc.	4	3	2	1	0
7. District provides drug free alternative activities & AODA-related clubs.	4	3	2	1	0
8. District has K-12 Student Assistance Program (SAP) in place.	4	3	2	1	0
9. Teachers are provided stipends/release time to cofacilitate groups.	4	3	2	1	0
10. Basic AODA training opportunities are made available by district.	4	3	2	1	0
11. Advanced AODA training opportunities are made available by district.	4	3	2	1	0
12. Group facilitation training opportunities are made available by district.	4	3	2	1	0
13. AODA curriculum training opportunities are made available by district.	4	3	2	1	0
14. Peer training opportunities are made available by district.	4	3	2	1	0

II. PROGRAMS FOR STUDENTS/COLLATERAL PROGRAMS FOR ADULTS (continued)

Criteria	Degree Criterion is Met. *Circle* appropriate number. Yes		To Some Degree		No
15. AODA coordinator has been provided with adequate AODA training.	4	3	2	1	0
16. Inservices on AODA provided annually to all teachers and staff.	4	3	2	1	0
17. District administrator has participated in AODA training.	4	3	2	1	0
18. All school staff have participated in AODA training.	4	3	2	1	0
19. Students have participated in AODA training.	4	3	2	1	0
20. School board members have participated in AODA training.	4	3	2	1	0
21. Student athletes have received AODA training.	4	3	2	1	0
22. All coaches have received AODA training.	4	3	2	1	0
23. All building principals have received AODA training.	4	3	2	1	0
III. AODA CURRICULUM					
1. District has a K-12 AODA specific curriculum that is developmentally appropriate, sequential, and mandatory at every grade level.	4	3	2	1	0
2. AODA curriculum is provided for all students including exceptional and gifted and talented.	4	3	2	1	0
3. Curriculum is up to date and accurate.	4	3	2	1	0
4. Curriculum is reviewed periodically to check for relevance and effectiveness.	4	3	2	1	0
5. Coordinates with and involves other disciplines at each grade level (e.g., health, literature, science, social studies).	4	3	2	1	0
6. Includes a continuum of knowledge and life skill competencies which will affect the decisions students have to make about AODA issues.	4	3	2	1	0
7. Contains a mechanism for continuing evaluation and revisions of curriculum material to incorporate current information.	4	3	2	1	0
8. Demonstrates sensitivity to the specific needs of the local school and community in terms of cultural appropriateness and local AODA problems.	4	3	2	1	0
9. Includes appropriate information on intervention and referral services including community AODA programs.	4	3	2	1	0
10. Uses peer education with students trained to provide information, facilitate discussion, and demonstrate skills to other students.	4	3	2	1	0

TOTALS

For DPI Use		
	DISTRICT TOTAL— Add the Total Score from Sections I, II, & III	
	Total Points Possible	184

CERTIFICATION SIGNATURES

Signature of District/Agency Administrator ➤	Date Signed
Signature of District AODA Coordinator ➤	Date Signed

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Appendix U

Glossary

AOD: alcohol and other drugs.

AODA: alcohol and other drug abuse.

AOD continuum of use:

Nonuse—no alcohol or other drugs.

Use—a reasonable ingestion of alcohol or other drugs, for a clearly defined, beneficial purpose, in a manner that is regulated by that purpose.

Misuse—an unreasonable ingestion of alcohol or other drugs that is always potentially harmful to the misuser, is not controlled by a beneficial purpose, and employs the alcohol or other drugs inappropriately, improperly, or in a manner beyond their intended purpose.

Abuse—an unreasonable ingestion of alcohol or other drugs that causes actual harm or injury to the abuser and ordinarily to others.

Chemical dependency—a chronic, progressive, incurable but treatable disease characterized by loss of control over alcohol or other drugs.

AODA Program Coordinator: a professional school employee holding a license issued by the Department of Public Instruction under Ch. PI 3 who is designated by the school board to: coordinate program activities among grade levels, building, community, and AODA program components for consistency and integrity; assist in writing, reviewing, and updating AODA policies and procedures; keep informed, communicate, and make recommendations regarding current materials, laws, grants, research, and community resources; act as a consultant and liaison for the district regarding AODA issues; coordinate program review and evaluation; work cooperatively with and serves on district committees for related programs such as at-risk, developmental guidance, peer programs, Employee Assistance Program, academic programs, suicide prevention, and protective behaviors; ensure that there is a network that provides staff support; coordinates the development and implementation of AODA classroom curriculum; and provide ongoing system analysis. When AODA program coordinators (building or district) are not also administrators, they need to establish a formal link with the administrator in the district responsible for the AODA program.

Assimilation: a level of learning that occurs when the learner incorporates new information, behaviors, or skills into his or her daily life.

Chemical Dependency: a chronic, progressive, incurable but treatable disease characterized by loss of control over alcohol or other drugs.

Chemicals: alcohol or other drugs.

Children At Risk: children affected by a variety of health, social, educational, and economic factors that cause an inability to cope, thereby affecting their school attendance and performance.

Community Core Group Training: basic AODA training for community members from a variety of systems for the purpose of (1) improving their personal-system functioning toward youths and adults, (2) ensuring that all are operating from the same knowledge base, (3) learning ways of cooperating for community prevention, and (4) investigating and promoting solutions for AODA-related problems in the community.

Competencies: cognitive, personal, interpersonal, and social system skills that learners develop as they explore and assimilate fundamental principles.

Constructivist View of Learning: based upon the cognitive psychology theory of learning which says that students construct their own learnings based primarily on their prior knowledge.

DPI: Department of Public Instruction.

EAP: Employee Assistance Program.

EEN: Exceptional Educational Needs

Enabling: allowing a person to continue a destructive behavior pattern of using alcohol and other drugs out of a mistaken belief that one is helping that person.

Fundamental Principles: foundational beliefs in human development.

Illicit drugs: drugs whose use, sale, or possession is prohibited by law.

Infuse (infusion): the blending of AODA concepts and outcomes with concepts and outcomes of other subject areas such as science, social studies, and language arts.

Integrate (integration): to develop philosophical and functional consistency among individual components of the AODA program, between the AODA program and other school programs, and between school and community programs.

Intervention: efforts to respond to and provide appropriate assistance to students who demonstrate behaviors of concern that may indicate an AODA problem or who seek help for such problems themselves.

Outcomes (teacher, student, parent): question statements designed to authentically assess the degree to which fundamental principles have been assimilated.

OWI: operating a motor vehicle while under the influence of alcohol or other drugs.

Peer programs: programs developed to help peers work with others using the dynamics of peer interaction, peer pressure, peer influence, and peer support.

Portfolio: a collection of student work that documents the student's learning in AODA.

Prevention: efforts to provide pupils with appropriate information and developmental experiences necessary to make personally and socially responsible decisions regarding their own use of alcohol and other drugs; and to cope effectively with personal and social results of decisions made by others regarding alcohol and other drug use.

Recovery: a process of ongoing and consistent steps or strategies that encourage chemically dependent people to regain health through nonuse and self-renewal.

SAP: Student Assistance Program.

Treatment: goal-oriented, highly structured activities that take place outside the school or home and are designed to interrupt alcohol or other drug abuse or chemical dependency.

User: someone who chooses to ingest mood-altering chemicals, including alcohol and other drugs.

Wisconsin Statutes and Administrative Rules That Affect AODA Programs

Wisconsin Statutes

The following excerpts from statutes are provided in an effort to help those involved in implementing AODA programs to interpret applicable Wisconsin law. Please note that none of the statutes is reprinted in its entirety.

48.34 Disposition of child adjudged delinquent. If the judge adjudges a child delinquent, he or she shall enter an order deciding one or more of the dispositions of the case as provided in this section under a care and treatment plan. Subsections (4m) and (8) are exclusive dispositions, except that either disposition may be combined with the disposition under sub. (4p) or (7m) and the disposition under sub. (4m) may be combined with the disposition under sub. (5). The dispositions under this section are:

(1) Counsel the child or the parent, guardian or legal custodian.

(2) Place the child under supervision of an agency, the department if the department approves or a suitable adult, including a friend of the child, under conditions prescribed by the judge including reasonable rules for the child's conduct and the conduct of the child's parent, guardian or legal custodian, designed for the physical, mental and moral well-being and behavior of the child.

(2m) Place the child in his or her home under the supervision of an agency, as defined under s. 48.38(1)(a), and order the agency to provide specified services to the child and the child's family, which may include but are not limited to individual or group counseling, homemaker or parent aide services, respite care, housing assistance, day care or parent skills training.

(3) Designate one of the following as the placement for the child:

(a) The home of a relative of the child.

(b) A home which need not be licensed if placement is for less than 30 days.

(c) A foster home licensed under s. 48.62 or a group home licensed under s. 48.625.

(d) A residential treatment center licensed under s. 48.60.

(4) If it is shown that the rehabilitation or the treatment and care of the child cannot be accomplished by means of voluntary consent of the parent or guardian, transfer legal custody to any of the following:

(a) A relative of the child.

(b) A county department.

(c) A licensed child welfare agency.

(4m) Transfer legal custody to the department for placement in a secured correctional facility, but only if:

(a) The child has been found to be delinquent for the commission of an act which if committed by an adult would be punishable by a sentence of 6 months or more; and

(b) The child has been found to be a danger to the public and to be in need of restrictive custodial treatment.

(4p) If the child committed a crime specified in s. 943.70, a judge may place restrictions on the child's use of computers.

(4s) (a) In addition to any other dispositions imposed under this section, if the child is found to have violated s. 161.41 (2r), (3), (3m), (3n) or (3r), the judge shall order one of the following penalties:

1. For a first violation, a forfeiture of not more than $50.

2. For a violation committed within 12 months of a previous violation, a forfeiture of not more than $100 or suspension of the person's operating privilege as provided under s. 343.30 (6)(b) 2 or both.

3. For a violation committed within 12 months of 2 or more previous violations, a forfeiture of not more than $500 or revocation of the person's operating privilege under s. 343.30 (6)(b) 3 or both.

(am) In addition to any other dispositions imposed under this section, if the child is found to have violated a. 161.41 (1) or (1m), the judge shall order one of the following penalties:

1. For a first violation, a forfeiture of not less than $250 nor more than $500.

2. For a violation committed within 12 months of a previous violation, a forfeiture of not less than $300 nor more than $500 or suspension of the person's operating privilege as provided under s. 343.30 (6)(b) 2 or both.

3. For a violation committed within 12 months of 2 or more previous violations, a forfeiture of $500 or revocation of the person's operating privilege under s. 343.30 (6)(b) 3 or both.

(b) After ordering a disposition under par. (a) or (am), the judge, with the agreement of the child, may enter an additional order staying the execution of the dispositional order. If a judge stays a dispositional order under this paragraph, he or she shall enter an additional order requiring the child to do any of the following:

1. Submit to an alcohol and other drug abuse assessment that conforms to the criteria specified under s. 48.547 (4) and that is conducted by an approved treatment facility. The order shall designate an approved treatment facility to conduct the alcohol and other drug abuse assessment and shall specify the date by which the assessment must be completed.

2. Participate in an outpatient alcohol or other drug abuse treatment program at an approved treatment facility, if an assessment conducted under subd. 1 or s. 48.295 (1) recommends treatment.

3. Participate in a court-approved alcohol or other drug abuse education program.

(c) If the approved treatment facility, with the written informed consent of the child or, if the child has not attained the age of 12, the written informed consent of the child's parent, notifies the agency primarily responsible for providing services to the child that the child has submitted to an assessment under this subsection and that the child does not need treatment or education, the judge shall notify the child of whether or not the original dispositional order will be reinstated.

(d) If the child completes the alcohol or other drug abuse treatment program or court-approved education program, the approved treatment facility or court-approved education program shall, with the written informed consent of the child or, if the child has not attained the age of 12, the written informed consent of the child's parent, notify the agency primarily responsible for providing services to the child that the child has complied with the order and the judge shall notify the child of whether or not the original dispositional order will be reinstated.

(e) If an approved treatment facility or court-approved education program, with the written informed consent of the child or, if the child has not attained the age of 12, the written informed consent of the child's parent, notifies the agency primarily responsible for providing services to the child that a child is not participating in the program or that a child has not satisfactorily completed a recommended alcohol or other drug abuse treatment program or an education program, the judge shall impose the original disposition under par. (a) or (am).

(5) (a) If the child is found to have committed a delinquent act which has resulted in damage to the property of another, or actual physical injury to another excluding pain and suffering, the judge may order the child to repair damage to property or to make reasonable restitution for the damage or injury if the judge, after taking into consideration the well-being and needs of the victim, considers it beneficial to the well-being and behavior of the child. Any such order shall include a finding that the child alone is financially able to pay

and may allow up to 12 months for the payment. Objection by the child to the amount of damages claimed shall entitle the child to a hearing on the question of damages before the amount of restitution is ordered.

(b) 1. Subject to subd. 2, in addition to any other employment or duties permitted under ch. 103 or any rule or order under ch. 103, a child who is 12 or 13 years of age who is participating in a restitution project provided by the county may, for the purpose of making restitution ordered by the court under this subsection, be employed or perform any duties under any circumstances in which a child 14 or 15 years of age is permitted to be employed or performed duties under ch. 103 or any rule or order under ch. 103.

2. Under this subsection, a court may not order a child who is 12 or 13 years of age to make more than $250 in restitution.

(6) (a) If the child is in need of special treatment or care the judge may order the child's parent, guardian or legal custodian to provide such care. If the parent, guardian or legal custodian fails or is financially unable to provide the care, the judge may order the care provided by an appropriate agency whether or not legal custody has been taken from the parents. An order of special treatment or care under this paragraph may not include an order for the administration of psychotropic drugs.

(b) Payment for the special treatment or care that relates to alcohol and other drug abuse services ordered under par. (a) shall be in accordance with s. 48.361.

(6m) If the report prepared under s. 48.33 recommends that the child is in need of an integrated service plan and if an integrated service program under s. 46.56 has been established in the county, the judge may order that an integrated service plan be developed and implemented.

(7) The judge may restrict, suspend or revoke the operating privilege, as defined in s. 340.01(40), of a child who is adjudicated delinquent under a violation of any law in which a motor vehicle is involved. Any limitation of the operating privilege shall be endorsed upon the operator's license and notice of the limitation forwarded to the department of transportation.

(7m) If the child is adjudicated delinquent under a violation of s. 161.41 (2r), (3), (3m), (3n) or (3r) by possessing or attempting to possess a controlled substance listed in schedule I or II under ch. 161 while in or otherwise within 1,000 feet of a state, county, city, village or town park, a swimming pool open to members of the public, a youth center, as defined in s. 161.01 (22), or a community center, while on or otherwise within 1,000 feet of any private or public school premises or while on or otherwise within 1,000 feet of a school bus, as defined in s. 340.01(56), the judge shall do both of the following:

(a) Require that the child participate for 100 hours in a supervised work program under sub. (9) or perform 100 hours of other community service work.

(b) Revoke the child's operating privilege, as defined in s. 340.01(40), for not less than 6 months nor more than 2 years. The judge shall immediately take possession of any revoked license and forward it to the department of transportation together with the record of conviction and notice of the revocation.

(8) If the judge finds that no other court services or alternative services are needed or appropriate it may impose a maximum forfeiture of $50 based upon a determination that this disposition is in the best interest of the child and in aid of rehabilitation, except that the court may raise the maximum ceiling on the amount of the forfeiture by $50 for every subsequent adjudication of delinquency concerning an individual child. Any such order shall include a finding that the child alone is financially able to pay the forfeiture and shall allow up to 12 months for payment. If the child fails to pay the forfeiture, the judge may vacate the forfeiture and order other alternatives under this section, in accordance with the conditions specified in this chapter; or the judge may suspend any license issued under ch. 29 for not less than 30 days nor more than 90 days, or suspend the child's operating privilege as defined in s. 340.01(40) for not less than 30 days nor more than 90 days. If the judge suspends any license under this subsection, the clerk of the court shall immediately take possession of the

suspended license and forward it to the department which issued the license, together with a notice of suspension clearly stating that the suspension is for failure to pay a forfeiture imposed by the court. If the forfeiture is paid during the period of suspension, the suspension shall be reduced to the time period which has already elapsed and the court shall immediately notify the department which shall then return the license to the child.

(9) SUPERVISED WORK PROGRAM. (a) The judge may utilize as a dispositional alternative court-ordered participation in a supervised work program. The judge shall set standards for the program within the budgetary limits established by the county board of supervisors. The work program may provide the child reasonable compensation reflecting a reasonable market value of the work performed, or it may consist of uncompensated community service work, and shall be administered by the county department or a community agency approved by the judge.

(b) The supervised work program shall be of a constructive nature designed to promote the rehabilitation of the child, shall be appropriate to the age level and physical ability of the child and shall be combined with counseling from a member the staff of the county department or community agency or other qualified person. The program may not conflict with the child's regular attendance at school. The amount of work required shall be reasonably related to the seriousness of the child's offense.

(c) 1. Subject to subd. 2, in addition to any other employment or duties permitted under ch. 103 or any rule or order under ch. 103, a child who is 12 or 13 years of age who is participating in a community service project provided by the county may, for purposes of performing community service work ordered by the court under this subsection, be employed or perform any duties under any circumstances in which a child 14 or 15 years of age is permitted to be employed or perform duties under ch. 103 or any rule or order under ch. 103.

2. Under this subsection, a court may not order a child who is 12 or 13 years of age to perform more than 40 total hours of community service work.

(10) SUPERVISED INDEPENDENT LIVING. (a) The judge may order that a child 17 or more years of age be allowed to live independently, either alone or with friends, under such supervision as the judge deems appropriate.

(b) If the plan for independent living cannot be accomplished with the consent of the parent or guardian, the judge may transfer custody of the child as provided in sub. (4)(a) to (c).

(c) The judge may order independent living as a dispositional alternative only upon a showing that the child is of sufficient maturity and judgment to live independently and only upon proof of a reasonable plan for supervision by an appropriate person or agency.

(11) TRANSFER TO FOREIGN COUNTRIES UNDER TREATY. If a treaty is in effect between the United States and a foreign country, allowing a child adjudged delinquent who is a citizen or national of the foreign country to transfer to the foreign country, the governor may commence a transfer of the child if the child and the child's parent, guardian, legal custodian or the court request.

(12) EDUCATIONAL PROGRAM. (a) Except as provided in par. (d), the judge may order the child to attend any of the following:

1. A nonresidential educational program, including a program for children at risk under s. 118.153, provided by the school district in which the child resides.

2. Pursuant to a contractual agreement with the school district in which the child resides, a nonresidential educational program provided by a licensed child welfare agency.

3. Pursuant to a contractual agreement with the school district in which the child resides, an educational program provided by a private, nonprofit, nonsectarian agency that is located in the school district in which the child resides and that complies with 42 USC 2000d.

4. Pursuant to a contractual agreement with the school district in which the child resides, an educational program provided by a vocational, technical and adult education district located in the school district in which the child resides.

(b) The judge shall order the school board to disclose the child's pupil records, as defined under s. 118.125(1)(d), to the county department or licensed child welfare agency responsible for supervising the child, as necessary to determine the child's compliance with the order under par. (a).

(c) The judge shall order the county department or licensed child welfare agency responsible for supervising the child to disclose to the school board, vocational, technical and adult education district board or private, nonprofit, nonsectarian agency which is providing an educational program under par. (a) 3 records or information about the child, as necessary to assure the provision of appropriate educational services under par. (a).

(d) This subsection does not apply to a child with exceptional educational needs, as defined under s. 115.76 (3).

(13) ALCOHOL OR DRUG TREATMENT OR EDUCATION. (a) If the report prepared under s. 48.33 recommends that the child is in need of treatment for the use or abuse of alcohol beverages or controlled substances and its medical, personal, family or social effects, the court may order the child to enter an outpatient alcohol and other drug abuse treatment program at an approved treatment facility. The approved treatment facility shall, under the terms of a service agreement between the county and the approved treatment facility, or with the written informed consent of the child or the child's parent if the child has not attained the age of 12, report to the agency primarily responsible for providing services to the child as to whether the child is cooperating with the treatment and whether the treatment appears to be effective.

(b) If the report prepared under s. 48.33 recommends that the child is in need of education relating to the use of alcohol beverages or controlled substances, the court may order the child to participate in an alcohol or other drug abuse education program approved by the court. The person or agency that provides the education program shall, under the terms of a service agreement between the county and the education program, or with the written informed consent of the child or the child's parent if the child has not attained the age of 12, report to the agency primarily responsible for providing services to the child about the child's attendance at the program.

(c) Payment for the court ordered treatment or education under this subsection in counties that have a pilot program under s. 48.547 shall be in accordance with s. 48.361.

Section note: 1983 Acts 399, 438; 1985 Acts 176, 311; 1987 Acts 27, 285, 339, 403; 1989 Acts 31, 107, 121

115.36 Assistance for alcohol and other drug abuse programs. (1) The purpose of this section is to enable and encourage public and private schools to develop comprehensive programs to prevent or ameliorate alcohol and other drug abuse among minors.

(2) The department shall:

(a) Develop and conduct training programs for the professional staff of public and private schools in alcohol and other drug abuse prevention, intervention and instruction programs.

(b) Provide consultation and technical assistance to public and private schools for the development and implementation of alcohol and other drug abuse prevention, intervention and instruction programs.

(c) Provide fellowship grants to support advanced training or education in comprehensive school health and alcohol and other drug abuse education.

(d) Provide access to informational resources for alcohol and other drug abuse education programs and services including, but not limited to:

1. The screening, revision and evaluation of available information resources.

2. The establishment of a central depository and loan program for high cost informational resources.

3. The systematic dissemination of information concerning available resources to appropriate public and private school staff.

(e) Create a council under s. 15.04(1)(c) to advise the department concerning the administration of this section.

(3) (a) The department shall, from the appropriation under s. 20.255(2)(g), fund school district projects designed to assist minors experiencing problems resulting from the use of alcohol or other drugs or to prevent alcohol or other drug abuse by minors. The department shall:

1. Administer grant application and disbursement of funds.
2. Monitor program implementation.
3. Assist in and ensure evaluation of projects.
4. Report biennially in its report under s. 15.04(1)(d) on program progress and project evaluation.
5. Promulgate necessary rules for the implementation of this subsection.

(b) Grants under this subsection may not be used to replace funding available from other sources.

(c) Grants under this subsection may be made only where there is a matching fund contribution from the local area in which a program is designed to operate of 20% of the amount of the grant obtained under this subsection. Private funds and in-kind contribution may be applied to meet the requirement of this paragraph.

(d) A school district applying for aid under this subsection shall submit a copy of the application to the county department under s. 51.42 for its advisory review. The county department under s. 51.42 may, and the council established under sub. (2)(e) shall, submit an advisory recommendation with respect to the application to the department prior to the approval or denial of the application.

Section note: Ch. 331, Laws of 1979; Ch. 20, Laws of 1981; 1983 Acts 27, 524; 1985 Act 176; 1989 Acts 31, 122

115.361 Early alcohol and other drug abuse prevention and intervention programs. **(1)** HEAD START SUPPLEMENT. From the appropriation under s. 20.255(2)(dm), the state superintendent shall distribute funds to agencies determined by the state superintendent to be eligible for designation as head start agencies under 42 USC 9836 to provide comprehensive health, educational, nutritional, social and other services to economically disadvantaged children and their families. The state superintendent shall distribute the funds in a manner consistent with 42 USC 9831 to 9852 except that there is no matching fund requirement. The state superintendent shall give preference in funding under this subsection to an agency that is receiving federal funds under 42 USC 9831 to 9852. No funds distributed under this subsection may be used to match available federal funds under 42 USC 9831 to 9852.

(2) DRUG ABUSE RESISTANCE EDUCATION. (a) In this subsection:

1. "Law enforcement agency" has the meaning given in s. 165.83(1)(b).
2. "Law enforcement officer" has the meaning given in s. 165.85(2)(c).

(am) A school board may contract with a city or county to provide drug abuse resistance education to pupils enrolled in grades 5 to 8. Instruction shall be provided by law enforcement officers employed by the county or city who have been specially trained to provide such instruction. The law enforcement officers may use guest lecturers and others to assist them in providing instruction.

(b) A school board contracting under par. (am) may apply to the state superintendent for a grant to help fund the costs of the program. The state superintendent shall review the applications and determine which of the applicants will receive grants. A grant shall fund 100% of the cost of the classroom materials for the program and 80% of the costs of the contract, except that no grant may exceed $50,000. Grants shall be awarded from the appropriations under s. 20.255(2)(dm) and (v). Funds in the appropriation under s. 20.255(2)(v) shall be fully utilized before a grant is awarded from the appropriation under s. 20.255(2)(dm).

(bm) Beginning January 1, 1991, law enforcement agencies shall use the sheriff's department of a county having a population of 500,000 or more, or a program that provides comparable training, to train law enforcement officers for the program under this subsection.

(c) The state superintendent shall promulgate rules to implement and administer this subsection, including rules establishing criteria for selecting grant recipients under par. (b).

(3) GRANTS FOR FAMILIES AND SCHOOLS TOGETHER PROGRAMS. (a) A school board may apply to the state superintendent for a grant to fund a families and schools together program designed to identify pupils who are 6 to 11 years of age who have a high risk of dropping out of school, experiencing alcohol and other drug abuse problems or being adjudged delinquent. The program shall provide prevention and early intervention activities involving joint school, family and community participation, including mental health and alcohol and other drug abuse program specialists.

(b) Beginning in the 1990-91 school year and annually thereafter, the state superintendent may award grants of up to $50,000 to school districts with small and medium memberships and grants of up to $70,000 to school districts with large memberships. Grants shall be awarded from the appropriation under s. 20.255(2)(dm). In this paragraph, "membership" has the meaning given in s. 121.004(5).

(c) A school board may contract with a private, nonprofit organization for the program under this subsection.

(4) GRANTS FOR PUPIL ALCOHOL AND OTHER DRUG ABUSE PROGRAM PROJECTS. (a) The state superintendent may award grants of up to $1,000 to a participating school district for alcohol and other drug abuse education, prevention or intervention programs designed by the pupils enrolled in the school district. The school district shall use the funds for the costs of the projects.

(b) Grants under this subsection shall be awarded from the appropriation under s. 20.255 (2)(dm). To the extent possible, the state superintendent shall ensure that grants are equally distributed on a statewide basis.

(5) GRANTS FOR AFTER-SCHOOL AND SUMMER SCHOOL PROGRAMS. (a) A school board, with the cooperation and support of a community-based organization, may apply to the state superintendent for a grant of up to $30,000 to fund an after-school or summer school program for pupils in grades 1 to 9.

(b) The state superintendent shall award grants under this subsection from the appropriation under s. 20.255(2)(dm). The amount of a grant may not exceed 80% of the cost of the program, including in-kind contributions. The state superintendent may award a grant to a school board under this subsection only if all of the following apply:

1. The program identifies the special skills and interests of individual pupils and helps them develop those skills and interests.

2. The program is coordinated with the school district's program for children at risk under s. 118.153 and the school district's alcohol and drug abuse prevention program.

3. The program includes a school tutoring program operated by the school board or the community-based organization for pupils in grades 1 to 9 who are one or more years behind their age group in reading, writing or mathematics or who exhibit other significant academic deficiencies, including poor school attendance or school work completion problems. The state superintendent may consider whether any of the following applies to the program in determining whether to award a grant:

a. The tutoring program provides at least one instructor for every 6 pupils.

b. The school district supplies the instructional materials.

c. The tutoring program serves at least 18 pupils each week.

4. No more than 7% of the amount awarded will be used for program administration by the school district.

(c) The state superintendent shall:

1. Ensure that grants are awarded to school districts that have a higher than average dropout rate.

2. Give preference in awarding grants to programs that use retired teachers.

3. Annually by July 1, evaluate the programs funded under this subsection and submit a report describing his or her conclusions and recommendations to the chief clerk of each

house of the legislature for distribution to the appropriate standing committees under s. 13.172(3).

4. Promulgate rules to implement and administer this subsection.

(6) SCHOOL COUNSELORS, PSYCHOLOGISTS AND SOCIAL WORKERS. A school board may apply to the state superintendent for a one-time grant of up to $20,000 to assist in paying the cost of employing additional licensed school counselors, psychologists and social workers for pupils in the elementary grades. Grants shall be awarded from the appropriation under s. 20.255(2)(dm). The state superintendent may not award a grant under this subsection unless the school district matches the amount of the grant.

(7) TRANSFERS; REPORT. (a) Of the amount in the appropriation under s. 20.255(2)(dm) in the 1990-91 fiscal year and annually thereafter, the state superintendent shall allocate the following amounts for the following programs:

1. For head start supplements under sub. (1), $2,000,000.
2. For drug abuse resistance education grants under sub. (2), $100,000.
3. For grants for families and schools together programs under sub. (3), $1,000,000.
4. For grants for pupil alcohol and other drug abuse program projects under sub. (4), $300,000.
5. For grants for after-school and summer school programs under sub. (5), $720,000.
6. For grants for school counselors, psychologists and social workers under sub. (6), $250,000.

(b) Annually, the state superintendent shall determine whether the amount allocated for each program under par. (a) will be fully utilized based upon the applications received that meet the specified criteria for each program. If an amount will not be fully utilized, the state superintendent may transfer the unutilized funds to programs for which qualified applications exceed the amounts allocated. The transfer shall be made by November 1 of each school year, except that in any school year in which a biennial budget act takes effect, the transfer shall be made by November 1 or within 120 days after the effective date of the biennial budget act, whichever is later. Annually, the state superintendent shall submit a report to the joint committee of finance describing all transfers under this paragraph.

(c) The state superintendent shall collect and analyze information about the programs funded under this section, evaluate their effectiveness and submit a report of the evaluation to the governor and to the chief clerk of each house of the legislature for distribution to the appropriate standing committees under s. 13.172(3) by July 1, 1992.

(8) SUNSET. This section does not apply after June 30, 1993.

Section note: 1989 Act 122; 1989 Act 122 s. 3044 (5g) provides:

(5g) DRUG ABUSE RESISTANCE EDUCATION TRAINING. Notwithstanding section 20.255(2)(dm) of the statutes, of the amount in the appropriation under section 20.255(2)(dm) of the statutes and allocated under section 115.361(7)(a) 2 of the statutes, in the 1990-91 fiscal year the state superintendent of public instruction shall allocate up to $50,000 to reimburse the sheriff's department of a county having a population of 500,000 or more for the costs of training law enforcement officers to provide instruction to other law enforcement officers for the program under section 115.361(2) of the statutes.

115.362 Youth alcohol and other drug abuse programs.

(1) The department shall make grants to school districts and cooperative educational service agencies for alcohol and other drug abuse prevention, intervention and instruction programs. The department shall award at least 30 grants each school year.

(2) (a) The department shall award grants from the appropriations under s. 20.255(2)(fi) and (w) to school districts for any of the following:

1. The development or expansion of a school district-wide, kindergarten to grade 12 curriculum in the prevention of and intervention in alcohol and other drug abuse.
2. If a school district has a curriculum described under subd. 1, the development or expansion of an alcohol and other drug abuse prevention and intervention program.

(b) The department shall award grants under sub. (1) from the appropriation under s. 20.255(2)(k) only for alcohol and other drug abuse intervention programs.

(3) Except for grants under sub. (2)(a), no school district or cooperative educational service agency may receive more than one grant under this section. Grants awarded under sub. (2)(a) shall not be used to supplant or replace funds otherwise available for the program.

(4) (a) Each school board receiving a grant under sub. (2)(a) 2 shall ensure that its program meets standards established by the state superintendent by rule. The school board may establish the program individually or on a cooperative basis with one or more school districts, cooperative educational service agencies or county handicapped children's education boards.

(b) As part of its alcohol and other drug abuse prevention and intervention program, the school board shall do all of the following:

1. Train teachers and other school staff members in the prevention of alcohol and other drug abuse.

2. Provide a pupil assistance program to intervene in the abuse of alcohol and other drugs by pupils.

3. Develop and implement an alcohol and other drug abuse curriculum for grades kindergarten to 12.

4. Provide instruction to pupils in communication, problem solving and decision making, dealing effectively with peer pressure, critical thinking, stress reduction, self-improvement and positive self-esteem.

5. Release teachers from other duties in order to enable them to participate in training programs under subd. 1 and s. 115.36(2)(a) and in pupil assistance programs under subd. 2.

(c) The school board shall coordinate its alcohol and other drug abuse prevention and intervention program with other such programs available in the school district and to the greatest extent possible shall involve pupils, parents, professional school staff, treatment professionals, law enforcement officers and court personnel in the development and implementation of the program.

(5) The state superintendent shall promulgate rules establishing criteria for the awarding of grants under sub. (2)(a). The rules shall require that the state superintendent give priority in awarding grants to school districts in which no pupil assistance program is available.

Section note: 1987 Acts 339, 403, 403 s. 256; 1989 Act 31

118.01 Educational goals and expectations. (1) PURPOSE. Public education is a fundamental responsibility of the state. The constitution vests in the state superintendent the supervision of public instruction and directs the legislature to provide for the establishment of district schools. The effective operation of the public schools is dependent upon a common understanding of what public schools should be and do. Establishing such goals and expectations is a necessary and proper complement to the state's financial contribution to education. Each school board should provide curriculum, course requirements and instruction consistent with the goals and expectations established under sub. (2). Parents and guardians of pupils enrolled in the school district share with the state and school board the responsibility for pupils meeting the goals and expectations under sub. (2).

(2) EDUCATIONAL GOALS. (a) *Academic skills and knowledge.* Since the development of academic skills and knowledge is the most important goal for schools, each school board shall provide an instructional program designed to give pupils:

1. Basic skills, including the ability to read, write, spell, perform basic arithmetical calculations, learn by reading and listening and communicate by writing and speaking.

2. Analytical skills, including the ability to think rationally, solve problems, use various learning methods, gather and analyze information, make critical and independent judgments and argue persuasively.

3. A basic body of knowledge that includes information and concepts in literature, fine arts, mathematics, natural sciences, including knowledge of the elements of agriculture and the conservation of natural resources, and social sciences, including knowledge of the rights

and responsibilities of the family as a consumer, cooperative marketing and consumers' cooperatives.

4. The skills and attitudes that will further lifelong intellectual activity and learning.

5. Knowledge in computer science, including problem solving, computer applications and the social impact of computers.

(b) *Vocational skills.* Each school board shall provide an instructional program designed to give pupils:

1. An understanding of the range and nature of available occupations and the required skills and abilities.

2. Preparation to compete for entry level jobs not requiring postsecondary school education.

3. Preparation to enter job-specific vocational training programs.

4. Positive work attitudes and habits.

(c) *Citizenship.* Each school board shall provide an instructional program designed to give pupils:

1. An understanding of the basic workings of all levels of government, including the duties and responsibilities of citizenship.

2. A commitment to the basic values of our government, including by appropriate instruction and ceremony the proper reverence and respect for and the history and meaning of the American flag, the Declaration of Independence, the U.S. constitution and the constitution and laws of this state.

3. The skills to participate in political life.

4. An understanding of the function of organizations in society.

5. Knowledge of the role and importance of biological and physical resources.

6. Knowledge of state, national and world history.

118.126 Privileged communications. (1)A school psychologist, counselor, social worker and nurse, and any teacher or administrator designated by the school board who engages in alcohol or drug abuse program activities, shall keep confidential information received from a pupil that the pupil or another pupil is using or is experiencing problems resulting from the use of alcohol or other drugs unless:

(a) The pupil using or experiencing problems resulting from the use of alcohol or other drugs consents in writing to disclosure of the information;

(b) The school psychologist, counselor, social worker, nurse, teacher or administrator has reason to believe that there is serious and imminent danger to the health, safety or life of any person and that disclosure of the information to another person will alleviate the serious and imminent danger. No more information than is required to alleviate the serious and imminent danger may be disclosed; or

(c) The information is required to be reported under s. 48.981.

(2) A school psychologist, counselor, social worker or nurse, or any teacher or administrator designated by the school board who engages in alcohol or drug abuse program activities, who in good faith discloses or fails to disclose information under sub. (1) is immune from civil liability for such acts or omissions. This subsection does not apply to information required to be reported under s. 48.981.

Section note: Ch. 331, Laws of 1979; 1985 Act 163; 1987 Acts 188, 339

118.13 Pupil discrimination prohibited.(1) No person may be denied admission to any public school or be denied participation in, be denied the benefits of or be discriminated against in any curricular, extracurricular, pupil services, recreational or other program or activity because of the person's sex, race, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation or physical, mental, emotional or learning disability.

(2) (a) Each school board shall develop written policies and procedures to implement this section and submit them to the state superintendent as a part of its 1986 annual report under s. 120.18. The policies and procedures shall provide for receiving and investigating complaints by residents of the school district regarding possible violations of this section, for making determinations as to whether this section has been violated and for ensuring compliance with this section.

(b) Any person who receives a negative determination under par. (a) may appeal the determination to the state superintendent.

(3) (a) The state superintendent shall:

1. Decide appeals made to him or her under sub. (2)(b). Decision of the state superintendent under this subdivision are subject to judicial review under ch. 227.

2. Promulgate rules necessary to implement and administer this section.

3. Include in the department's biennial report under s. 15.04 (1)(d) information on the status of school district compliance with this section and school district progress toward providing reasonable equality of educational opportunity for all pupils in this state.

(b) The state superintendent may:

1. Periodically review school district programs, activities, and services to determine whether the school boards are complying with this section.

2. Assist school boards to comply with this section by providing information and technical assistance upon request.

(4) Any public school official, employe or teacher who intentionally engages in conduct which discriminates against a person or causes a person to be denied rights, benefits or privileges, in violation of sub. (1), may be required to forfeit not more than $1,000.

Section note: Ch. 418 s. 929 (55)(a), Laws of 1977; 1983 Acts 374, 412; 1985 Act 29; 1987 Act 332; 1987 Act 332 s. 66a provides that sub. (4) takes effect July 1, 1989; 1985 Act 29 s. 3043 (1) provides that the state superintendent shall submit the rules required under s. 118.13 (3)(a) 2 in final draft form no later than July 1, 1986

118.153 Children at risk. (1) In this section:

(a) "Children at risk" means:

1. Pupils who are one or more years behind their age group in the number of credits attained or in basic skill levels and are also one or more of the following:

a. Dropouts.

b. Absent, in any school semester, for more than 15% of the number of hours of direct pupil instruction required during that semester under s. 121.02(1)(f) 2, whether such absences are excused or unexcused.

c. Parents.

d. Adjudicated delinquents.

2. Pupils in grades 5 to 8 who are 2 or more years behind their age group in basic skill levels.

3. Pupils in grades 5 to 8 who are one or more years behind their age group in basic skill levels and have been absent, in any school semester, for more than 10% of the number of hours of direct pupil instruction required during that semester under s. 121.02(1)(f) 2, whether such absences are excused or unexcused.

(b) "Dropout" means a child who ceased to attend school, continues to reside in the school district, does not attend a public, private or vocational, technical and adult education district school or home-based private educational program on a full-time basis, has not graduated from high school and does not have an acceptable excuse under s. 118.15(1)(b) to (d) or (3).

(2) (a) Every school board shall identify the children at risk who are enrolled in the school district and annually by August 15 develop a plan describing how the school board will meet their needs. The plan shall do all of the following:

1. Describe how curriculum modifications, alternative programs, remedial instruction and pupil support services will be used to meet the needs of the children at risk.

2. Include a list of all community support services available to the children at risk and describe how the services will be used and coordinated to meet the needs of the children at risk.

3. Provide for parent-teacher conferences for parents of children at risk and describe how parental involvement will be used to meet the needs of the children at risk.

(b) 1. If in the previous school year a school district had 50 or more dropouts or a dropout rate exceeding 5% of its total high school enrollment, the school board shall submit the plan developed under par. (a) to the state superintendent for his or her approval.

2. If in the previous school year a school district had a dropout rate greater than 2.5% but not exceedig 5%, the school board may submit the plan developed under par. (a) to the state superintendent for his or her approval.

(3) (a) Beginning in the 1986-87 school year:

1. Every school board shall make available to the children at risk enrolled in the school district a program for children at risk.

2. Upon request of a pupil who is a child at risk or the pupil's parent or guardian, the school board shall enroll the pupil in the program for children at risk. If a school board makes available more than one program for children at risk, the school board shall enroll the pupil in the program selected by the pupil's parent or guardian if the pupil meets the prerequisites for that program.

(b) Programs for children at risk shall be designed to allow the pupils enrolled to meet high school graduation requirements under s. 118.33.

(c) 1. The school board of a school district operating under ch. 119 shall identify appropriate private, nonprofit, nonsectairan agencies located in the school district to meet the requirements under pars. (a) and (b) for the children at risk enrolled in the school district.

2. The school board may contract with the agencies identified under subd. 1 for not more than 30% of the children at risk enrolled in the school district if the school board determines that the agencies can adequately serve such children.

3. The school board shall pay each contracting agency, for each full-time equivalent pupil served by the agency, an amount equal to at least 80% of the average per pupil cost for the school district.

(4) (a) Beginning in August 1987, and annually thereafter, the school board of every school district whose plan was approved under sub. (2)(b) in the previous school year shall submit a report to the state superintendent. The report shall include information on the school district's attendance, retention and high school graduation rates for pupils enrolled in a program for children at risk and the percentage of pupils enrolled in a program for children at risk who received academic credit in the previous school year.

(b) Except as provided under par. (d), if upon receipt of a school board's annual report under par. (a) the state superintendent determines that any 3 of the conditions listed under par. (c) existed in the school district in the previous year, the school district shall receive from the appropriation under s. 20.255 (2)(bc), for each pupil enrolled in the school district's program for children at risk, additional state aid in an amount equal to 10% of the school district's average per pupil aids provided under ss. 20.143 (1)(bs) and 20.255 (2)(ac), (ad), (an) and (q) in the previous school year.

(c) 1. The school district's average attendance rate for pupils enrolled in the school district's program for children at risk was at least 70%.

2. The school district's retention rate for pupils enrolled in the school district's program for children at risk was at least 70%.

3. At least 70% of the pupils enrolled in the school district's program for children at risk as high school seniors received a high school diploma.

4. At least 70% of the pupils enrolled in the school district's program for children at risk received academic credit.

5. The school district's program for children at risk can show significant improvement in reading and mathematics performance for each semester of instruction.

(d) The state superintendent may not provide additional aid under par. (b) to a school district for a children at risk program serving pupils in grades 5 or 6 unless the program met all of the following requirements in the previous school year:

1. The average attendance rate for the pupils enrolled in the program was at least 90%.

2. At least 80% of the pupils enrolled in the program demonstrated significant academic progress.

3. At least 70% of the parents or guardians of the pupils enrolled in the program participated in parent involvement activities established by the school board.

(e) If the appropriation under s. 20.255 (2)(bc) in any fiscal year is insufficient to pay the full amount of aid under par. (b), state aid payments shall be prorated among the school districts entitled to such aid.

(5) The school board of a school district receiving additional state aid under sub. (4)(b) shall use the additional funds received for meeting the requirements under subs. (2)(a) and (3).

(6) Biennially, the legislative audit bureau shall audit school district eligibility, performance criteria and state aid payments under this section.

(7) The state superintendent shall promulgate rules to implement and administer this section. The rules shall not be overly restrictive in defining approved programs and shall not serve to exclude programs that have demonstrated success in meeting the needs of children at risk.

Section note: 1985 Acts 29, 332; 1987 Act 27; 1989 Acts 31, 336; 1989 Act 336 s. 3203 (44) provides that the change to the appropriation reference in sub. (4)(b) takes effect July 1, 1990.

118.257 Liability for referral to police. (1) In this section:

(a) "Controlled substance" has the meaning specified in s. 161.01 (4).

(b) "Distribute" has the meaning specified in s. 161.01 (9).

(c) "Pupil services professional" means a school counselor, school social worker, school psychologist or school nurse.

(d) "School" means a public, parochial or private school which provides an educational program for one or more grades between grades 1 and 12 which is commonly known as an elementary school, middle school, junior high school, senior high school or high school.

(2) A school administrator, principal, pupil services professional or teacher employed by a school board is not liable for referring a pupil enrolled in the school district to law enforcement authorities, or for removing a pupil from the school premises or from participation in a school-sponsored activity, for suspicion of possession, distribution or consumption of an alcohol beverage or a controlled substance.

Section note: Ch. 331, Laws of 1979; Ch. 79, Laws of 1981; 1983 Act 373; 1987 Act 170

118.258 Electronic communication devices prohibited. (1) Each school board shall adopt rules prohibiting a pupil from using or possessing an electronic paging or 2-way communication device while on premises owned or rented by or under the control of a public school. The rules may allow for the use or possession of such a device by a pupil if the school board or its designee determines that the device is used or possessed for a medical, school, educational, vocational or other legitimate use.

(2) (a) Annually, the school board shall provide each pupil enrolled in the school district with a copy of the rules under sub. (1).

(b) The school board shall submit a copy of the rules under sub. (1) to the state superintendent when the rule is first adopted and whenever the rule is amended.

Section note: 1989 Act 121

125.09 General restrictions. (1) PUBLIC PLACE. No owner, lessee or person in charge of a public place may permit the consumption of alcohol beverages on the premises of the

public place, unless the person has an appropriate retail license or permit. This subsection does not apply to municipalities, buildings and parks owned by counties, regularly established athletic fields and stadiums, school buildings, churches, premises in a state fair park or clubs.

(2) POSSESSION OF ALCOHOL BEVER-AGES ON SCHOOL GROUNDS PROHIBITED. (a) In this subsection:

1. "Motor vehicle" means a motor vehicle owned, rented or consigned to a school.

2. "School" means a public, parochial or private school which provides an educational program for one or more grades between grades 1 and 12 and which is commonly known as an elementary school, middle school, junior high school, senior high school or high school.

3. "School administrator" means the person designated by the governing body of a school as ultimately responsible for the ordinary operations of a school.

4. "School premises" means premises owned, rented or under the control of a school.

(b) Except as provided by par. (c) no person may possess or consume alcohol beverages:

1. On school premises;

2. In a motor vehicle, if a pupil attending the school is in the motor vehicle; or

3. While participating in a school-sponsored activity.

(c) Alcohol beverages may be possessed or consumed on school premises, in motor vehicles or by participants in school-sponsored activities if specifically permitted in writing by the school administrator consistent with applicable laws, ordinances and school board policies.

(d) A person who violates this subsection is subject to a forfeiture of not more than $200, except that ss. 48.344 and 125.07 (4)(c) and (d) provide the penalties applicable to underage persons.

Section note: Ch. 79, Laws of 1981; 1983 Act 74; 1985 Act 218

120.12 School board duties. The school board of a common or union high school district shall:

(1) MANAGEMENT OF SCHOOL DISTRICT. Subject to the authority vested in the annual meeting and to the authority and possession specifically given to other school district officers, have the possession, care, control and management of the property and affairs of the school district, except for property of the school district used for public library purposes under s. 43.52.

(2) GENERAL SUPERVISION. Visit and examine the schools of the school district, advise the school teachers and administrative staff regarding the instruction, government and progress of the pupils and exercise general supervision over such schools.

(3) TAX FOR OPERATION AND MAINTENANCE. (a) On or before the 3rd Monday in October, determine the amount necessary to be raised to operate and maintain the schools of the school district and public library facilities operated by the school district under s. 43.52, if the annual meeting has not voted a tax sufficient for such purposes for the school year. On or before the last working day in October, the school district clerk shall certify the appropriate amount so determined to each appropriate municipal clerk who shall assess the amount certified and enter it on the tax rolls as other school district taxes are assessed and entered.

(b) If a tax sufficient to operate and maintain the schools of a school district for the ensuing school year has not been determined, certified and levied prior to the effective date of school district reorganization under ch. 117 affecting any territory of the school district, the school board of the affected school district shall determine, on or before the 3rd Monday of October following the effective date of the reorganization, the amount of deficiency in operation and maintenance funds on the effective date of the reorganization which should have been paid by the property in the affected school district if the tax had been determined, certified and assessed prior to the effective date of the reorganization. On or before the last working day in October, the school district clerk shall certify the appropriate amount to each

appropriate municipal clerk who shall assess, enter and collect the amount as a special tax on the property. This paragraph does not affect the apportionment of assets and liabilities under s. 66.03.

(c) If on or before the 3rd Monday in October the school board determines that the annual meeting has voted a tax greater than that needed to operate the schools of the school district for the school year, the school board may lower the tax voted by the annual meeting. On or before the last working day in October, the school district clerk shall certify the appropriate amount so determined to each appropriate municipal clerk who shall assess the amount certified to him or her and enter it on the tax rolls in lieu of the amount previously reported.

(4) TAX FOR DEBT RETIREMENT. On or before the 3rd Monday of October, determine the amount necessary to meet any irrepealable tax obligations or other financial commitments of the school district not otherwise provided for. The school district clerk shall certify the amount apportioned to each appropriate municipal clerk who shall include the amount certified to him and enter it on the tax rolls as other school district taxes are assessed and entered.

(5) REPAIR OF SCHOOL BUILDINGS. Keep the school buildings and grounds in good repair, suitably equipped and in safe and sanitary condition at all times. The school board shall establish an annual building maintenance schedule.

(6) INSURANCE ON SCHOOL BUILDINGS AND GROUNDS. Keep the school buildings, equipment and other property amply insured. If there are no funds in the school district treasury sufficient to pay the premium, the school board may execute a note for that purpose.

(7) DEPOSITORY. Designate one or more public depositories in which the money belonging to the school district shall be deposited and specify whether the moneys shall be maintained in time deposits subject to the limitations of s. 66.04 (2), demand deposits or saving deposits. When the money is so deposited in the name of the school district, the school district treasurer and bondsmen are not liable for any loss as defined in s. 34.01 (2). The interest on such deposits shall be paid into the school district treasury.

(8) INVENTORY. Annually make an inventory of the school district property.

(9) DISCUSSION OF PUBLIC QUESTIONS. Upon the written application of one-half of the electors of the school district, allow the use of the school buildings or grounds for the free discussion of public questions so far as such use does not interfere, in the opinion of the school board, with the prime purpose of the school buildings or grounds.

(10) CITIZEN ASSOCIATIONS. If the citizens of any community are organized into a nonpartisan, nonsectarian, nonexclusive association for the discussion of public questions or for the promotion of public health by instruction in physical culture and hygiene or by physical exercises, grant to such association the use, when not being used for its prime purpose, of a school building or other school district property which is capable of being used in the work of such association, provide free of charge any necessary light, heat and janitor service and make such other provisions as are necessary for the free and convenient use of such school buildings or property by the association at such times as the association designates. All such gatherings shall be free to the public.

(11) INDIGENT CHILDREN. Provide books and school supplies for indigent children residing in the school district.

(12) SANITARY FACILITIES. Provide and maintain enough suitable and separate toilets and other sanitary facilities for both sexes at each school.

(13) MAIL BOX. Provide and maintain a mail box for each school of the school district located on a rural mail route.

(14) COURSE OF STUDY. Determine the school course of study, with the advice of the state superintendent.

(15) SCHOOL HOURS. Establish rules scheduling the hours of a normal school day. The school board may differentiate between the various elementary and high school grades in scheduling the school day. The equivalent of 180 such days, as defined in s. 115.01 (10), shall be held during the school term. This subsection shall not be construed to eliminate a school

district's duty to bargain with the employe's collective bargaining representative over any calendaring proposal which is primarily related to wages, hours and conditions of employment.

(16) IMMUNIZATION OF CHILDREN. (a) In cooperation with local public health agencies and officials specified in ss. 140.09, 141.01, 141.105, 141.02 and 141.04 develop and implement a plan to encourage compliance with par. (b) and s. 140.05 (16)(b) and submit the plan to the department of health and social services by September 1, 1991, and annually thereafter.

(b) Require each student to present evidence of completed basic and recall (booster) series immunizations unless the student, if an adult, or the parent, guardian or legal custodian of a minor student submits a written waiver to the school board under s. 140.05 (16)(c).

(17) UNIVERSITY OF WISCONSIN SYSTEM TUITION. Pay the tuition of any pupil enrolled in the school district and attending a center or institution within the university of Wisconsin system if the course the pupil is attending at the university is not offered in the school district and the pupil will receive high school credit for the course.

(18) CONTINUITY OF EDUCATIONAL PROGRAMMING. Coordinate and provide for continuity of educational programming for pupils receiving educational services as the result of a court order under s. 48.34 (12), including but not limited to providing a written report to the court assigned to exercise jurisdiction under ch. 48 and the agency which is required to submit an educational plan for a child under s. 48.33 (1)(e). The written report shall describe the child's educational status and make recommendations regarding educational programming for the child. The written report shall be provided to the court assigned to exercise jurisdiction under ch. 48 and the agency at least 3 days before the date of the child's dispositional hearing.

(19) INTEGRATED SERVICE PROGRAM. If the county board of supervisors establishes an integrated service program for children with severe disabilities under s. 59.07 (147), participate in an integrated service program for children with severe disabilities under s. 59.07 (147) and may enter into written interagency agreements or contracts under the program.

(20) PROHIBITION OF TOBACCO. Prohibit the use of all tobacco products on premises owned or rented by, or under the control of, a school board, except that the school board may allow the use of tobacco products on premises owned by the school district and rented to another person for noneducational purposes.

Section note: Ch. 206, 418, Laws of 1977; Chs. 301, 318, 334, Laws of 1979; 1983 Act 189 s. 329 (21); 1985 Acts 29, 218, 225; 1987 Acts 285, 285 s. 35; 1989 Acts 31, 114, 209, 264, 359; 1989 Act 209 s. 3 provides that sub. (20) take effect on September 1, 1990.

Administrative Rules

Analysis by the Department of Public Instruction

Statutory authority: ss. 115.36 (3) (a) 5, 115.361 (2) (c), 115.361 (5) (c) 4, 115.362 (5), and 227.11 (2) (a), Stats.

Statute interpreted: ss. 115.36 (1) and (3), 115.361 (2), (3), (4), (5), (6) and 115.362 (2), Stats. 1989 Wisconsin Act 31 created and 1989 Wisconsin Act 122 amended s. 115.361 (2), Stats., which establishes a grant program for drug abuse resistance education. This statute requires the state superintendent to establish criteria for awarding grants under this program.

1989 Wisconsin Act 31 amended the youth alcohol and other drug abuse program under s. 115.362, Stats. The statute requires the state superintendent to establish criteria for awarding grants under this program and to give priority in awarding grants to school districts in which no pupil assistance program is available.

1989 Wisconsin Act 122 created ss. 115.361 (3), (4), (5) and (6), Stats., which establishes grant programs related to families and schools together, pupil alcohol and other drug abuse, after-school and summer school and school counselors, psychologists and social workers, respectively. This act requires the state superintendent to establish criteria for awarding grants under the after-school and summer school programs and to give priority in awarding grants to school districts which have a higher than average dropout rate and use retired teachers in their after-school and summer school programs.

In addition to the grant programs listed above, the proposed rules establish criteria for awarding grants for alcohol and other drug abuse programs, pupil alcohol and other drug abuse programs and school counselors, psychologists and social workers' programs. The proposed rules establish general application requirements for all grant programs under this chapter, except for grants under the pupil alcohol and other drug abuse program, as well as specific application requirements listed under each corresponding section.

The proposed rules create an advisory council to advise the state superintendent in reviewing grant applications submitted under the alcohol and other drug abuse programs.

The proposed rules also establish general requirements, including alcohol and other drug abuse program policies, that must be in place for any school board conducting an alcohol and other drug abuse program. These policies shall do the following:

1. Ensure that administrators and teachers engaging in alcohol and other drug abuse programs receive appropriate training and are aware of the privileged communications requirement under s. 118.126, Stats.

2. Provide for cooperative arrangements with the county department of community programs regarding the availability of alcohol and other drug abuse services as specified under s. 118.24 (2) (f), Stats.

3. Ensure that school administrators, principals, pupil services professionals and teachers are aware of the provisions pertaining to liability for referral to police of pupils to be removed from school grounds or school sponsored activities as a result of suspicion of possession or consumption of an alcoholic beverage or controlled substance under s. 118.257, Stats.

4. Ensure that school administrators, principals, pupil services professionals and teachers employed by the school board are aware of the provisions of s. 118.258, Stats., pertaining to the prohibition of electronic communications devices and that pupils are annually provided with a copy of the board's rules pertaining to this prohibition.

5. Ensure that school administrators, principals, pupil services professionals and teachers employed by the school board are aware of the provisions of s. 120.12 (19), Stats., pertaining to prohibiting the use of all tobacco products on school premises.

The policy requirements under 4 and 5 listed above, are due to the recent enactment of 1989 Wisconsin Acts 121 and 142, pertaining to prohibiting the use or possession of an electronic paging or 2-way communication device and the use of any tobacco products on school premises, respectively.

The proposed rules establish requirements of a comprehensive K-12 alcohol and other drug abuse program to which grants under this chapter shall be related.

SECTION 1. Chapter PI 32 is created to read:

CHAPTER PI 32
GRANTS FOR ALCOHOL AND OTHER DRUG ABUSE PROGRAMS

PI 32.01 PURPOSE. Under s. 115.36, Stats., public and private schools are encouraged to develop comprehensive kindergarten through grade 12 programs to prevent or ameliorate alcohol and other drug abuse among minors. This chapter sets forth characteristics of a comprehensive kindergarten through grade 12 program including criteria and procedures in awarding grants under the following:

(1) Section 115.36 (3), Stats., which allows the state superintendent to fund school district projects designed to assist minors experiencing problems resulting from the use of alcohol or other drugs or to prevent alcohol or other drug abuse by minors.

(2) Section 115.361 (2), Stats., which allows a school board to apply to the state superintendent for a grant not to exceed $50,000 to fund the costs of contracting with a city or county law enforcement agency to provide drug abuse resistance education to pupils enrolled in grades 5 through 8.

(3) Section 115.361 (3), Stats., which allows a school board to apply to the state superintendent for a grant to fund a families and schools together program designed to identify pupils who are 6 through 11 years of age who have a high risk of dropping out of school, experiencing alcohol and other drug abuse problems or being adjudged delinquent.

(4) Section 115.361 (4), Stats., which allows a school district to apply to the state superintendent for a grant of up to $1,000 to develop education, prevention or intervention programs designed by the pupils enrolled in the school district.

(5) Section 115.361 (5), Stats., which allows a school board with the cooperation and support of a community-based organization to apply to the state superintendent for a grant of up to $30,000 to fund an after-school or summer school program for pupils in grades 1 through 9.

(6) Section 115.361 (6), Stats., which allows a school board to apply to the state superintendent for a one-time grant of up to $20,000 to assist in paying the cost of employing additional licensed school counselors, psychologists and social workers for pupils in the elementary grades.

(7) Section 115.362 (2), Stats., which requires the department to make grants to school districts for the development or expansion of youth alcohol and other drug abuse prevention and intervention, school district-wide kindergarten through grade 12 curriculum; or if the school district has the curriculum described in this subsection, the development or expansion of an alcohol and other drug abuse prevention and intervention program.

PI 32.02 DEFINITIONS. In this chapter:

(1) "After-school program" or "summer school program" means tutoring programs which are offered after regular school hours or in summer sessions for pupils in grades 1 through 9 who exhibit academic deficiencies resulting from poor attendance, poor school work completion or inadequate basic skills development.

(2) "AODA program" means a comprehensive kindergarten through grade 12 alcohol and other drug abuse program as described in s. PI 32.06.

(3) "AODA program coordinator" means a professional school employee holding a license issued by the department under ch. PI 3 who is designated by the school board to administer, coordinate, and implement the AODA program.

(4) "CESA" means a cooperative educational service agency created in ch. 116, Stats.

(5) "Community-based organization" means a private, nonprofit organization which is representative of a community or a significant segment of a community and which provides educational and job training services.

(6) "Council" has the meaning given in s. 115.36 (2) (e), Stats.

(7) "County department of community programs" means the county department of community programs appointed under s. 51.42 (3) (a), Stats.

(8) "Department" means the Wisconsin Department of Public Instruction.

(9) "Intervention" means efforts to respond to and provide appropriate assistance to students who demonstrate behaviors of concern which may indicate an alcohol and other drug abuse problem or who seek help for such problems themselves.

(10) "Law enforcement agency" has the meaning given in s. 165.83 (1) (b), Stats.

(11) "Law enforcement officer" has the meaning given in s. 165.85 (2) (c).

(12) "Membership" has the meaning given in s. 121.004 (5), Stats.

(13) "Prevention" means efforts to provide pupils appropriate information and developmental experiences necessary to make personally and socially responsible decisions regarding their own alcohol and other drug use and non-use; and to cope effectively with the personal and social results of decisions made by others regarding use.

(14) "Pupil assistance program," also referred to as a student assistance program, means an alcohol and other drug abuse support program involving pupils in individual or group settings operating under conditions established by school board policy, rules and responsibilities.

(15) "School board" has the meaning defined in s. 115.001 (7), Stats.

(16) "State superintendent" means the state superintendent of public instruction for the state of Wisconsin.

PI 32.03 GENERAL REQUIREMENTS. (1) AODA PROGRAM POLICIES. A school board conducting an AODA program shall establish policies and procedures which meet the following requirements:

(a) Ensure that administrators and teachers designated to engage in AODA programs under s. 118.126, Stats., have received appropriate training and are aware of the requirements of s. 118.126, Stats.

(b) Provide for cooperative arrangements with the county department of community programs regarding the availability of AODA services as specified under s. 118.24 (2) (f), Stats.

(c) Ensure that school administrators, principals, pupil services professionals and teachers employed by the school board are aware of the provisions under s. 118.257, Stats., pertaining to liability for referral to police, when referring pupils to law enforcement authorities for removal from school grounds or school sponsored activities as a result of suspicion of possession or consumption of an alcoholic beverage or controlled substance.

(d) Ensure that school administrators, principals, pupil services professionals and teachers employed by the school board are aware of the provisions of s. 118.258, Stats., pertaining to the prohibition of electronic communications devices and that pupils are annually provided with a copy of the board's rules pertaining to this prohibition.

(e) Ensure that school administrators, principals, pupil services professionals and teachers employed by the school board are aware of the provisions of s. 120.12 (19), Stats., pertaining to prohibiting the use of all tobacco products on school premises.

(2) GRANT APPLICATION REQUIREMENTS. Annually, except for those applying for grants under s. PI 32.10, the grant applicant under this chapter shall include the following in its grant applications:

(a) Evidence of the need for the grant.

(b) The name of the AODA program coordinator, and evidence that the AODA program coordinator meets the requirements under s. PI 32.06 (8).

(c) A description of how the proposed program activities will be integrated with the school district's AODA program as specified in s. PI 32.06.

(d) A description of personnel involved in developing the proposed program activities including the resource materials and other related AODA programs reviewed.

(e) An outline of the proposed program goals, objectives, activities, personnel to be involved, materials to be developed or acquired, and related timelines.

(f) A description of how the proposed program activities will be evaluated including quantifiable data which will be used to determine the extent to which the program objectives were met.

(g) A description of how the program activities will continue after the grant period is completed.

(h) Any additional requirements specified under ss. PI 32.07 to 32.13.

PI 32.04 ADVISORY COUNCIL. (1) An 18 member council, selected from local educational agency staff, professionals in the AODA field and various interest groups, shall be appointed by and advise the state superintendent concerning the administration of s. 115.36 (3), Stats., and other matters related to AODA programs as the state superintendent requests.

(2) Council members shall be appointed to staggered 3-year terms.

(3) Council members may not serve more than 2 consecutive 3-year terms.

(4) The state superintendent may withdraw an appointment of a council member who fails to attend 3 consecutive meetings.

(5) The council chairperson shall be elected annually from the council's membership. The term shall begin on July 1 and conclude on the following June 30.

PI 32.05 REVIEW OF APPLICATIONS AND AWARDING OF GRANTS. (1) The council under s. PI 32.04 shall review the applications submitted under s. 32.07 and any other applications under this chapter as requested by the state superintendent and make recommendations to the state superintendent regarding the school district applications. These recommendations shall be based on the criteria specified in sub. (2) (a) to (d) and consideration of recommendations made by the county department of community programs.

(2) The state superintendent shall review the applications submitted under ss. PI 32.07 to 32.13 and consider the recommendations made by the council under sub. (1) and shall determine which of the applications eligible for funding will receive grants. The state superintendent shall make this determination based on the following criteria:

(a) The extent to which the goals and objectives relate to the purpose of the proposed program.

(b) The extent to which the program activities are appropriate to the goals and objectives of the proposed program.

(c) The extent to which the proposed program activities will be integrated with the school district's existing or proposed AODA program and will assist the district in meeting the requirements of s. PI 32.06.

(d) The adequacy of the schedule of implementation and the extent to which continuation of program activities is ensured after the grant period is completed.

(3) To the extent possible, the grant shall be distributed equally throughout the state.

PI 32.06 COMPREHENSIVE KINDERGARTEN THROUGH GRADE 12 ALCOHOL AND OTHER DRUG ABUSE PROGRAMS. Under s. 115.36 (1), Stats., every public and private school is encouraged to develop AODA programs to prevent or ameliorate alcohol and other drug abuse among minors. Sections 115.36 (3), 115.361 (2), 115.361 (3), 115.361 (5), 115.361 (6) and 115.362 (2), Stats., provide for grants to assist school districts in developing or supplementing AODA programs. An AODA program shall meet the requirements specified in s. PI 32.03 (1) and consist of the following:

(1) Alcohol and other drug abuse specific curriculum and instruction which meets all of the requirements of s. 118.01 (2) (d) 2, c and 6, Stats., and which:

(a) Is developmentally appropriate, sequential and mandatory at each grade level.

(b) Is based on scientifically valid, current, unbiased, and accurate information and which avoids scare tactics, stereotyping, and moralizing.

(c) Is integrated with existing curricula and related activities such as developmental guidance, health, science, social studies, driver's education, physical education, children at risk, youth suicide prevention, and school age parents.

(d) Includes, but is not limited to, communication, problem solving, decision-making, dealing effectively with peer pressure, critical thinking, stress reduction, self-improvement and positive self-esteem skills development.

(e) Includes information on state laws related to alcohol and other drug abuse including s. 48.34 (7m), Stats., pertaining to findings of delinquency; s. 118.258, Stats., pertaining to the prohibition of electronic communication devices; s. 118.126, Stats., pertaining to privileged communications; s. 125.02 (8m), Stats., pertaining to the legal drinking age and s. 125.09 (2), Stats., pertaining to possession of alcohol beverages on school grounds.

(2) A written school district policy which supports comprehensive alcohol and other drug abuse programming including pupil assistance programs, curriculum, instruction, staff development and youth oriented activities. The policies shall be widely publicized and include:

(a) Involvement of staff, parents, pupils and community in formulating the policies.

(b) Assurances that the school district policies are in compliance with applicable federal, state and local law.

(c) Administrative guidelines to ensure that all school district personnel understand their roles and responsibilities under the policies.

(d) Procedures for staff or parents to refer for assistance pupils with AODA related problems as well as procedures for pupil self-referrals.

(e) Measures designed to eliminate alcohol, tobacco and other drug use on school premises and at school related functions.

(f) Procedures for assisting pupils who are reentering school as a result of AODA related treatment, suspension or expulsion.

(g) Procedures for implementation of penalties and consequences for violation of school board policies related to AODA use.

(h) Methods to ensure that penalties are uniformly and fairly applied.

(3) A pupil assistance program.

(4) Programs which employ peer-to-peer educational, assistance and leadership activities.

(5) Promotion of AODA free activities for pupils, such as students against driving drunk chapters and just say no clubs.

(6) Training about AODA for administrators, teachers, other school staff, support staff, and parents.

(7) Integration of community resources and support services including, but not limited to, human services providers, private treatment providers, law enforcement officers, and judicial personnel.

(8) An AODA program coordinator who is provided with time to coordinate the alcohol and other drug abuse program and who has received training or otherwise acquired skills and knowledge in the following areas:

(a) Basic AODA information including related state and federal laws and the continuum of alcohol and other drugs use, abuse and dependence and their effects on the individual, family and other systems.

(b) AODA program development, implementation, management and evaluation.

(c) AODA program components including, but not limited to, curriculum development, peer-to-peer activities and pupil assistance services including screening and referral procedures and group facilitation.

(9) An annual evaluation of the AODA program which measures program effort, effectiveness and efficiency including outcome data specific to pupils served in the program.

PI 32.07 GRANTS FOR ALCOHOL AND OTHER DRUG ABUSE PROGRAMS. (1) Under s. 115.36 (3), Stats., the state superintendent may fund school district projects designed to assist minors experiencing problems resulting from the use of alcohol or other drugs or to prevent alcohol or other drug abuse by minors.

(2) In addition to the grant application requirements under s. PI 32.03 (2), the application shall include the following:

(a) A description of community agencies, organizations, groups, parents and other individuals involved in developing the proposed program.

(b) A description of training to be provided, when, for whom and for what purpose.

(c) A description of the resources and funds necessary to implement the project including associated administrative costs.

(d) A budget which describes how the matching fund contribution of 20% required under s. 115.36 (3) (c), Stats., will be met. Private and in-kind contributions may be applied to meet this requirement.

(3) The grant applicant may not use the funds to supplant any funds which are otherwise available for the proposed project.

(4) The grant applicant shall submit a copy of the proposed project to the county department of community programs for advisory review as specified under s. 115.36 (3) (d), Stats, prior to its submittal to the state superintendent.

(5) The county department of community programs may and the council shall submit an advisory recommendation to the state superintendent. An advisory recommendation from the county department of community programs must be received by the department not later than 5 days after the deadline for receipt of project proposals.

Note: Form PI-1816, Application for Alcohol and Other Drug Programs, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

PI 32.08 GRANTS FOR DRUG ABUSE RESISTANCE EDUCATION PROGRAMS. (1) Under s. 115.361 (2), Stats., a school board may apply to the state superintendent for a grant to fund the costs of contracting with a city or county law enforcement agency to provide drug abuse resistance education to pupils enrolled in grades 5 through 8. No grant may exceed $50,000.

(2) In addition to the grant application requirements under s. PI 32.03 (2), the application shall include the following:

(a) A copy of an interagency agreement between the law enforcement agency and the school district, signed by the respective agency administrators, and including the following assurances:

1. The law enforcement agency shall make the law enforcement officer available on the designated days of instruction.

2. The law enforcement agency shall ensure that the law enforcement officer receives certified drug abuse resistance instructor training as specified in sub. (4).

3. The law enforcement officer shall plan instruction and other related activities with the AODA program coordinator, building principal and classroom teacher.

4. The law enforcement officer shall conduct 17 one-hour sessions which are, to the extent possible, held over 17 consecutive weeks.

5. The school district shall provide classroom space and allot one hour weekly for the drug abuse resistance education classroom instruction.

6. A department licensed school staff member shall be present in the classroom while the law enforcement officer presents the drug abuse resistance instruction.

(b) A budget which shall ensure and provide for the following:

1. A grant applicant shall use the grant to fund up to 100% of the cost of the classroom materials for the program in this section.

2. A grant applicant shall use the grant to fund not more than 80% of the costs of the contract in this section. The budget shall include a description of how the remaining 20% will be provided. Private and in-kind contributions may be used.

(3) Drug abuse resistance education instruction shall be provided by law enforcement officers employed by the county or city who have been specially trained to provide such instruction as specified in sub. (4). The law enforcement officers may use guest lecturers and others to assist in providing instruction.

(4) Law enforcement officers shall be trained through the sheriff's department of a county having a population of 500,000 or more, or a program that provides comparable training which shall include a minimum of 80 classroom hours of the following:

(a) Child development.
(b) Classroom management.
(c) Teaching techniques.
(d) Communication skills.
(e) Drug abuse training.
(f) Presentation of the drug abuse resistance education curriculum to other trainees.

(5) The drug abuse resistance education curriculum shall include activities and instruction related to the following:

(a) Drug use and the consequences involved.
(b) Resisting pressure to take drugs.
(c) Importance of using positive role models.
(d) Building of self-esteem.

Note: Form PI-1828, Application for Alcohol and Other Drug Programs, Project Grants/DARE, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

PI 32.09 GRANTS FOR FAMILIES AND SCHOOLS TOGETHER PROGRAMS. (1) Under s. 115.361 (3), Stats., a school board may apply to the state superintendent for a grant to fund a families and schools together program designed to identify pupils who are 6 through 11 years of age who have a high risk of dropping out of school, experiencing alcohol and other drug abuse problems or being adjudged delinquent.

(2) In addition to the grant application requirements under s. PI 32.03 (2), the application shall include the following:

(a) A description of how the program in this section provides prevention and early intervention activities involving joint participation of school, family and community agencies, including mental health and alcohol and other drug abuse program specialists.

(b) A written plan of operation which may include a contract between the school board and a private, nonprofit organization for the families and schools together program.

(3) (a) No grant may exceed $50,000 for school districts with small and medium memberships.

(b) No grant may exceed $70,000 for school districts with large memberships.

(c) School district membership shall be determined by dividing the total number of school districts into thirds, by membership. The top third, by membership, shall be designated large school districts; the middle third, by membership, shall be designated medium school districts; and the bottom third, by membership, shall be designated small school districts.

Note: Form PI-1813, Application for Alcohol and Other Drug Programs, Project Grants/fast, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

PI 32.10 GRANTS FOR PUPIL ALCOHOL AND OTHER DRUG ABUSE PROGRAM PROJECTS. (1) Under s. 115.361 (4), Stats., the state superintendent may award grants to a participating school district for alcohol and other drug abuse education, prevention or intervention programs designed by the pupils enrolled in the school district. No grant may exceed $1,000.

(2) The application under this section shall include the following:

(a) A description of the program and activities to be developed and implemented by pupils and whether they are being implemented at a building, district or community level.

(b) An outline of the proposed program goals, objectives, activities, personnel to be involved, materials to be developed or acquired and related timelines.

(c) A description of how the proposed program activities will be evaluated to determine the extent to which the objectives were met.

Note: Form PI-2391, Application for Alcohol and Other Drug Education Network, Student Alcohol and Other Drug Mini-Grants, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

PI 32.11 GRANTS FOR AFTER-SCHOOL AND SUMMER SCHOOL PROGRAMS. (1) Under s. 115.361 (5), Stats., a school board with the cooperation and support of a community-based organization, may apply to the state superintendent for a grant to fund an after-school or summer school program for pupils in grades 1 through 9. No grant may exceed $30,000.

(2) In addition to the application requirements under s. PI 32.03 (2), the application shall include the following:

(a) A description of how the program in this section is coordinated with the school district's program for children at risk under s. 118.153, Stats., and the school district's AODA program.

(b) A description of the methods used to identify the pupils to be served in the program and the special skills and interests of the individual pupils and the methods used to help them develop those skills and interests.

(c) A description of how retired teachers will be used in the program if the school district chooses to use retired teachers.

(d) A budget which includes a description of all cash or in-kind contributions which will be used to support the program. The amount of the grant awarded may not:

1. Exceed 80% of the cost of the project, including in-kind contributions.
2. Be used to pay more than 7% of the program administration costs of the school district.

(e) A description of how the program in this section will be coordinated with community-based organizations and how parents will be involved.

(f) A description of the tutoring program, including the number of teachers participating, teacher qualifications and number of pupils to be served.

(3) Grants shall be awarded to school boards as specified under s. 115.361 (5) (b), Stats., only if the following apply:

(a) The program identifies the special skills and interests of individual pupils and helps them develop those skills and interests.

(b) The program coordinates with the school district's program for children at risk under s. 118.153, Stats., and the school district's alcohol and drug abuse prevention program.

(c) The program includes a school tutoring program operated by the school board or the community-based organization for pupils in grades 1 through 9 who are one or more years behind their age group in reading, writing or mathematics or who exhibit other significant academic deficiencies, including poor school attendance or school work completion problems, based on written criteria adopted by the school board.

(d) The school district's dropout rate is higher than the state average.

(4) Preference in awarding grants to school districts shall be given to programs that use retired teachers.

(5) In determining whether to award a grant, the state superintendent may consider if any of the following applies to the program:

(a) The tutoring program provides at least one instructor for every 6 pupils.

(b) The school district supplies the instructional materials.

(c) The tutoring program serves at least 18 pupils each week.

Note: Form PI-1814, Application for Alcohol and Other Drug Programs, Project Grants for After School and Summer Programs, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

PI 32.12 GRANTS FOR SCHOOL COUNSELORS, PSYCHOLOGISTS AND SOCIAL WORKERS.

(1) Under s. 115.361 (6), Stats., a school board may apply to the state superintendent for a one-time grant to assist in paying the cost of employing additional licensed school counselors, psychologists and social workers for pupils in grades kindergarten through 6. No grant may exceed $20,000.

(2) In addition to the application requirements under s. PI 32.03 (2) the application shall include the following:

(a) A description of how the school counselor, psychologist or social worker will be involved in the district's AODA program.

(b) A budget which describes how the matching fund contribution required under s. 115.361 (6), Stats., is met. Matching funds may include private contributions.

Note: Form PI-1807, Application for Alcohol and Other Drug Programs, Project Grants for Pupil Services Team, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

PI 32.13 GRANTS FOR YOUTH ALCOHOL AND OTHER DRUG ABUSE PROGRAMS. (1) Under s. 115.362 (2), Stats., school districts, or school districts on a cooperative basis with one or more school districts, CESAs or county handicapped children's education boards may apply to the state superintendent for a grant for any of the following:

(a) The development or expansion of a school district-wide, kindergarten through grade 12 curriculum in the prevention of and intervention in AODA.

(b) If a school district has a curriculum described in par. (a), the development or expansion of an AODA prevention and intervention program which shall include the following activities:

1. Teachers and other school staff members will receive training in the prevention of pupils' alcohol and other drug abuse.
2. A pupil assistance program shall be provided.
3. An alcohol and other drug abuse education curriculum for grades kindergarten through 12 as specified in s. PI 32.06 shall be developed and implemented.
4. Alcohol and other drug abuse instruction shall be provided to pupils as specified in s. PI 32.06 (1) (d).
5. Teachers and other school staff will be provided with release time from other duties in order to enable them to participate in training programs and in pupil assistance programs.

(2) The program developed under sub. (1) (b), to the greatest extent possible, shall involve pupils, parents, professional school staff, treatment professionals, law enforcement officers and court personnel in the development and implementation of the program activities conducted under this section.

(3) In addition to the application requirements under s. PI 32.03 (2), the application shall include the following:

(a) A description of how the school district will provide alcohol and other drug abuse related instruction to pupils as specified in s. PI 32.06 (1) (d).

(b) A description of community agencies, organizations, groups, parents and other individuals involved in developing the proposed program.

(c) A description of training to be provided, when, for whom and for what purpose.

(d) A description of pupil assistance program components currently operating in the district.

(e) A description of the resources and funds necessary to implement the proposed program including the associated administrative costs.

(4) The grant applicant may not use the funds to supplant any funds which are otherwise available for the proposed project.

(5) Priority in awarding grants shall be given to grant applicants that have no pupil assistance program available.

Note: Form PI-1816, Application for Alcohol and Other Drug Programs, may be obtained at no charge from the Department of Public Instruction, Bureau for Pupil Services, P.O. Box 7841, Madison, WI 53707-7841.

Resources/AODA

Publications

American Council for Drug Education. *Drug-Free Schools and Children: A Primer for School Policymakers*. Washington, DC: ACDE, 1990.

Center for Civic Education. *Drugs in the Schools: Exercises in Participation*. Calabasas, CA: Center for Civic Education, 1989.

D'Onofrio, Carol D. *Tobacco Talk: Educating Young Children About Tobacco*. Santa Cruz, CA: Network Publications, 1991.

Fetro, Joyce V. *Step by Step to Substance Abuse Prevention*. Santa Cruz, CA: Network Publications, 1991.

Office of Educational Research and Improvement. *Drug Prevention Curricula: A Guide to Selection and Implementation*. Washington, DC: U.S. Department of Education, 1988.

Phi Delta Kappa. *Teenage Alcohol Abuse*. Bloomington, IN: Phi Delta Kappa, 1991.

Rogers, Todd, Beth Howard-Pitney, and Bonnie L. Bruce. *What Works? A Guide to School-Based Alcohol and Drug Abuse Prevention Curricula*. Palo, Alto, CA: Health Promotion Resource Center, Stanford Center for Research in Disease Prevention, 1989.

U.S. Department of Education. *Growing Up Drug Free: A Parent's Guide to Prevention*. Washington, DC: U.S. Department of Education, 1990.

U.S. Department of Education. *Learning to Live Drug Free: A Curricululm Model for Prevention*. Rockville, MD: National Clearinghouse for Alcohol and Drug Information, 1990.

U.S. Department of Health and Human Services. *Communicating About Alcohol and Other Drugs: Strategies for Reaching Populations at Risk*. Rockville, MD: Office for Substance Abuse Prevention, 1990.

U.S. Department of Health and Human Services. *Prevention Resource Guide: Preschool Children*. Rockville, MD: Office for Substance Abuse Prevention, 1990.

U.S. Department of Health and Human Services. *Youth and Drugs: Society's Mixed Messages*. Rockville, MD: Office for Substance Abuse Prevention, 1990.

State Organizations

Wisconsin Department of Public Instruction
125 S. Webster Street
P.O. Box 7841
Madison, WI 53707

Personnel

The Alcohol and Other Drug Abuse Programs Section of DPI is part of the Division for Handicapped Children and Pupil Services. See page 191 for specific personnel and telephone numbers.

Other Organizations

Alliance for a Drug-Free Wisconsin
125 S. Webster Street
Madison, WI 53707
(608) 266-9923

American Cancer Society
P.O. Box 8370
Madison, WI 53708
(608) 249-0487

American Heart Association
795 N. Van Buren Street
Milwaukee, WI 53202
(800) 242-9236

American Lung Association
1330 N. 1113 Street, Suite 190
Milwaukee, WI 53226
(414) 258-9100

Office of Justice Assistance
222 State Street, 2nd Floor
Madison, WI 53702
(608) 266-3323

The Prevention and Intervention Center for Alcohol and Other Drug Abuse (PICADA)
2000 Fordem Avenue
Madison, WI 53704
(608) 246-7600

University of Wisconsin-Extension
Bureau of Audiovisual Instruction
1327 University Avenue
P.O. Box 2093
Madison, WI 53701-2093
(800) 362-6888
(608) 262-1644

University of Wisconsin-Madison
Department of Health and Human Issues
Alcohol and Other Drug Studies
326 Lowell Hall
610 Langdon Street
Madison, WI 53703
(608) 263-7023

Wisconsin Association on Alcohol and Other Drug Abuse
2801 W. Beltline Highway, Suite 235
Madison, WI 53713
(608) 273-8616

Wisconsin Clearinghouse for Alcohol and Other Drug Information
P.O. Box 1468
Madison, WI 53701
(608) 263-2797
(800) 322-1468

Wisconsin Department of Health and Social Services
Office of Alcohol and Other Drug Abuse
Room 434, 1 W. Wilson Street
P.O. Box 7851
Madison, WI 53707-7851
(608) 266-2717

Wisconsin Department of Transportation
3617 Pierstorff St.
P.O. Box 7713
Madison, WI 53707-7713
(608) 246-3265

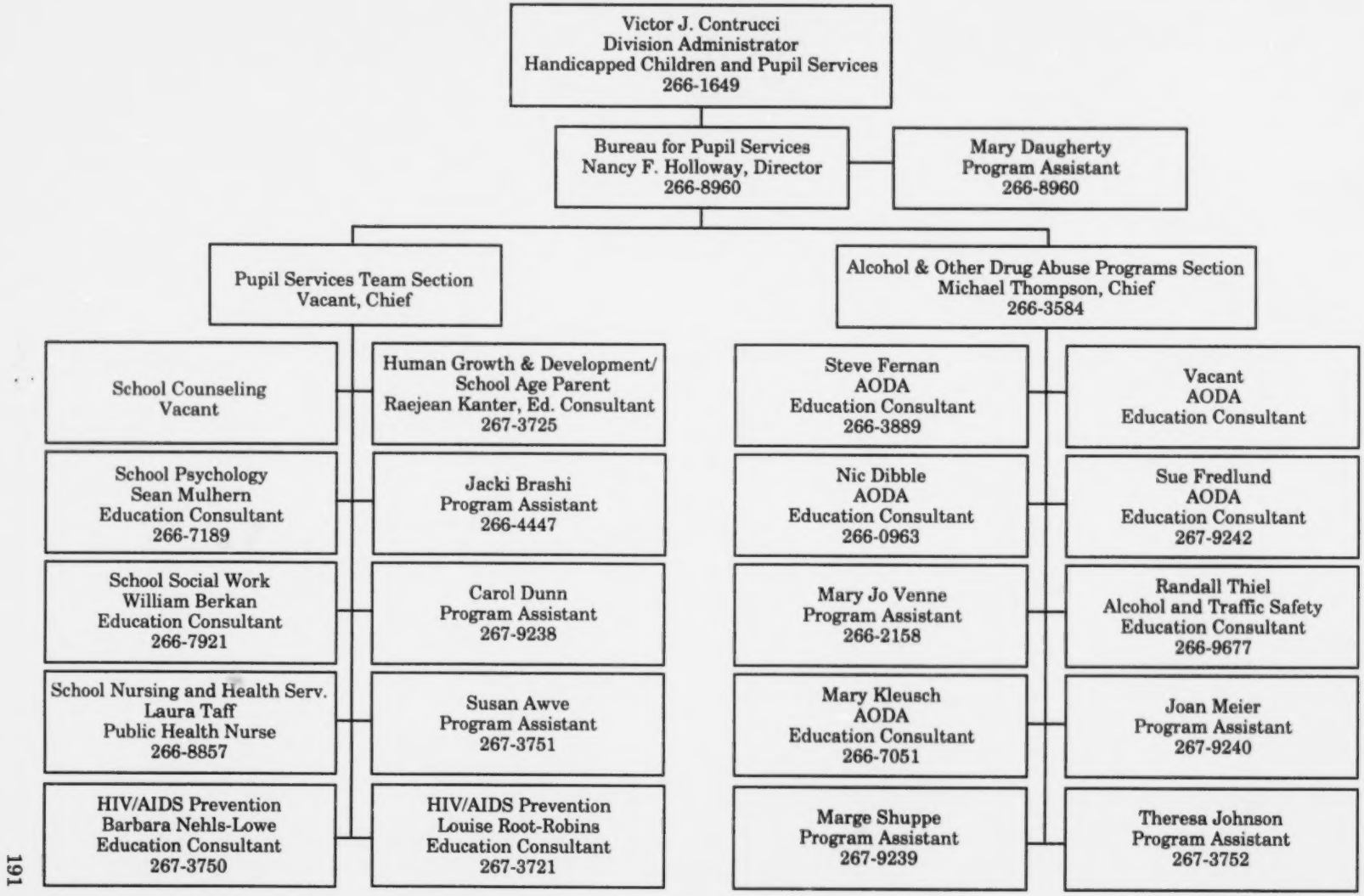
Wisconsin Educational
Communications Board
Manager of School Services
3319 West Beltline Highway
Madison, WI 53713-2899
(608) 273-5500

Wisconsin Federation of Parents for
Drug-Free Youth
P.O. Box 100
Two Rivers, WI 54241
(414) 794-7118

Wisconsin Positive Youth Development
Initiative, Inc.
122 State St., Suite 310
Madison, WI 53703
(608) 255-6351

Wisconsin Prevention Network
P.O. Box 1092
Madison, WI 53701-1092

Bureau for Pupil Services—Staff Listing



Cooperative Educational Service Agencies (CESAs)

Wisconsin has 12 CESAs throughout the state. Each agency has an AODA Education Network facilitator primarily responsible for assisting local school districts in the development and implementation of comprehensive AODA programs. In addition, each CESA makes available to schools both print and audiovisual resources to support instruction in AODA prevention.

School staff members can obtain assistance by writing or calling the CESA AODA facilitator in their area.

CESA #1
Larry Trine, Facilitator
2930 S. Root River Parkway
P.O. Box 27529
West Allis, WI 53227
(414) 546-3000

CESA #2
James Kampa, Facilitator
430 East High Street
Milton, WI 53563
(608) 755-2311 or 755-2368

CESA #3
Don Pecinovsky, Facilitator
1300 Industrial Drive
Fennimore, WI 53809-9702
(608) 822-3276

CESA #4
Carrol Arneson, Facilitator
1855 East Main Street
Onalaska, WI 54650
(608) 785-9371

CESA #5
Tom Newman, Facilitator
626 East Slifer Street
P.O. Box 564
Portage, WI 53901
(608) 742-8811

CESA #6
Jackie Schoening, Facilitator
2300 Ripon Road
P.O. Box 2568
Oshkosh, WI 54903
(414) 233-2372

CESA #7
Mary Miller, Facilitator
2280A South Broadway
Green Bay, WI 54304
(414) 448-5355

CESA #8
Jeff Bentz, Facilitator
204 East Main Street
Gillett, WI 54124
(414) 855-2114

CESA #9
Jaye Bessa, Facilitator
328 North Fourth Street
Tomahawk, WI 54487
(715) 453-2141

CESA #10
Gladys Bartelt, Facilitator
725 West Park Avenue
Chippewa Falls, WI 54729
(715) 723-0341

CESA #11
Bonnie Cook, Facilitator
P.O. Box 246
Elmwood, WI 54740
(715) 639-4201

CESA #12
Kathy Miller, Facilitator
301 13th Avenue East
Ashland, WI 54806
(715) 682-2363

National Organizations

As of 1992 the most comprehensive and up-to-date directory of national and state organizations is the Citizen's Alcohol and Other Drug Prevention Directory: Resources for Getting Involved, published by the federal Office of Substance Abuse Prevention. The directory lists public and private agencies and descriptions of programs and services. It is available at no charge from the Wisconsin Clearinghouse for Alcohol and Other Drug Information, P.O. Pox 1468, Madison, WI 53701. The Wisconsin Clearinghouse is the official Regional Alcohol and Drug Abuse Resource (RADAR) center for Wisconsin.

The Wisconsin Department of Public Instruction does not endorse private or commercial products or services, or products or services not affiliated with the DPI. The sources of information listed on these pages are intended only as a partial listing of the available resources related to alcohol and other drug abuse.

The following outline is not all-inclusive but does identify selected sources of AODA information and materials.

ACTION Drug Prevention Program.
806 Connecticut Avenue N.W., Suite M-606
Washington, DC 20525
(202) 634-9406
(800) 729-6686

Action on Smoking and Health (ASH)
2013 H Street NW
Washington, DC 20006
(202) 659-4310

Al-Anon and Alateen Family Group Headquarters
P.O. Box 862
Midtown Station
New York, NY 10018-0862
(212) 302-7240
(800) 356-9996 (hotline)

Alcoholics Anonymous
P.O. Box 459
Grand Central Station
New York, NY 10163
(212) 870-3400

American Cancer Society (ACS)
Emergency and Safety Program
1599 Clifton Road NE
Atlanta, GA 30329
(404) 320-3333 (for referral to closest ACS unit)

American Council for Drug Education (ACDE)
204 Monroe Street, Suite 110
Rockville, MD 20850
(301) 294-0600

American Heart Association (AHA)
7272 Greenville Avenue
Dallas, TX 75231
(214) 373-6300

American Lung Association (ALA)
1740 Broadway
New York, NY 10019
(212) 315-8700

The Badvertising Institute
195 Congress Street
Portland, Maine 04101
(207) 761-5887
(207) 773-3275 (bookstore)

Chemical People Project
The Public Television Outreach Alliance
c/o WQED-TV
4802 Fifth Avenue
Pittsburgh, PA 15213
(412) 391-0900

Cocaine Helpline
(800) COCAINE

Families Anonymous, Inc.
P.O. Box 528
Van Nuys, CA 91408
(818) 989-7841

Families in Action
2296 Henderson Mill Road, Suite 300
Atlanta, GA 30345
(404) 934-6364

Food and Drug Administration
Office of Consumer Affairs
5600 Fishers Lane HFE 88
Rockville, MD 20857
(301) 443-3170

Hazelden Foundation
15251 Pleasant Valley Road
P.O. Box 176
Center City, MN 55012-0176
(800) 328-9000

Institute on Black Chemical Abuse
2616 Nicollet Avenue S.
Minneapolis, MN 55408
(612) 871-7878

"Just Say No" International
2101 Webster Street, Suite 1300
Oakland, CA 94612
(510) 451-6666
(800) 258-2766

Midwest Regional Center for Drug-Free Schools and Communities
1900 Spring Road, Suite 300
Oak Brook, IL 60521
(708) 571-4710
(800) 252-0283

Nar-Anon Family Group Headquarters
World Service Office
P.O. Box 2562
Palos Verdes Peninsula, CA 90274
(213) 547-5800

Narcotics Anonymous
World Service Office
P.O. Box 9999
Van Nuys, CA 91409
(818) 780-3951

Narcotics Education, Inc.
55 West Oakridge Drive
Hagerstown, MD 21140
(301) 790-9735
(800) 548-8700

National Association of Children of Alcoholics (NACoA)
11426 Rockville Pikə, Suite 100
Rockville, MD 20852
(301) 468-0985

National Association of Prevention Professionals and Advocates
1555 Wilson Boulevard, Suite 300
Arlington, VA 22209
(703) 875-8756

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20847-2345
(301) 496-2600
(800) SAY-NOTO

National Council on Alcoholism and Drug Dependence Information Line
12 West 21st Street
New York, NY 10010
(800) NCA-CALL
(212) 206-6770

National Crime Prevention Council
177 Kay Street NW, 2nd Floor
Washington, DC 20006
(202) 466-6272

National Federation of Parents for Drug-Free Youth, Inc.
11159 B South Towne Square
St. Louis, MO 63123
(314) 845-1933

National Highway Traffic Safety Administration, NTS-21
U.S. Department of Transportation
400 7th Street SW
Washington, DC 20590
(202) 366-9550

National Institute on Alcohol Abuse and Alcoholism
5600 Fishers Lane
Pawklawn Building, Room 16-105
Rockville, MD 20857
(301) 443-3885

National Institute on Drug Abuse
P.O. Box 2345
Rockville, MD 20847-2345
(301) 443-6500
(800) 662-HELP

National PTA Drug and Alcohol Abuse Prevention Project
700 North Rush Street
Chicago, IL 60611
(312) 577-4500

Office for Substance Abuse Prevention
U.S. Department of Health and Human Services
Alcohol, Drug Abuse, and Mental Health Administration
5600 Fishers Lane, Room 945A
Rockville, MD 20857
(301) 443-0365

Office on Smoking and Health
Centers for Disease Control
MS K12
1600 Clifton Road NE
Atlanta, GA 30333
(404) 488-5708

Parents' Resource Institute for Drug Education, Inc. (PRIDE)
50 Hurt Plaza, Suite 210
Atlanta, GA 30303
(404) 577-4500

Programs for Indian Youth and Native Hawaiians
Room 2135, FOB6
400 Maryland Avenue, S.W.
Washington, DC 20202-6151
(202) 401-1887

Stop Teenage Addiction to Tobacco
121 Lyman Street, Suite 210
Springfield, MA 01103
(413) 732-7828

Students Against Driving Drunk (SADD)
P.O.Box 800
Marlboro, MA 01752
(508) 481-3568

TARGET
National Federation of State High School Associations
11724 NW Plaza Circle
P.O. Box 20626
Kansas City, MO 64195-0626
(816) 464-5400

Toughlove
P.O. Box 1069
Doylestown, PA 18901
(215) 348-7090
(800) 333-1069

Resources/Critical Thinking

Publications

Bagley, Michael, and Karen Hess. *200 Ways of Using Imagery in the Classroom*. New York: Trillium Press, Inc., 1987.

Baron, J.B., and R.J. Sternberg. *Teaching Thinking Skills, Theory and Practice*. New York: Freeman and Company, 1987.

Bellanca, Jim, and Robin Fogarty. *Mental Menus*. Kankakee, IL: Imperial International Learning, 1986.

Belth, Marc. *The Process of Thinking*. New York: David McKay Company, Inc., 1977.

Beyer, Barry K. *Practical Strategies for the Teaching of Thinking*. Boston: Allyn and Bacon, Inc., 1987.

Connelly, E. Michael and D. Jean Clandinin. *Teachers as Curriculum Planners*. New York: Teachers College Press, 1988.

Costa, Arthur, ed. *Developing Minds: A Resource Book for Thinking*. Alexandria, VA: ASCD, 1985.

Dreyer, Sharon Spredemann. *The Bookfinder 4: When Kids Need Books*. Circle Pines, MN: American Guidance Service, 1989.

Eggen, Paul D., Donald P. Kauchak, and Robert J. Harder. *Strategies for Teachers—Teaching Content and Thinking Skills*. Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1987.

Harnadek, Anita. *Critical Thinking—Book I*. Pacific Grove, CA: Midwest Publication Co., Inc., 1976.

Harnadek, Anita. *Critical Thinking—Book II*. Pacific Grove, CA: Midwest Publication Co., Inc., 1976.

Hess, Karen. *Enhancing Writing Through Imagery*. New York: Trillium Press, Inc., 1987.

Hester, Joseph, and Philip Vincent. *Philosophy for Young Thinkers*. New York: Trillium Press, Inc., 1987.

Hullfish, J. Gorden and Philip Smith. *Reflective Thinking: The Method of Education*. New York: Dodd, Mead, 1961.

Johnson, David W., et al. *Circles of Learning*. Alexandria, VA: Association for Supervision and Curriculum Development, 1988.

Joyce, B., and M. Weil. *Models of Teaching*. Englewood Cliffs, NJ: Prentice-Hall, 1986.

Keely, Stuart. *Asking the Right Questions: A Guide to Critical Thinking*. Englewood Cliffs, NJ: Prentice-Hall, Inc., 1987.

Large, Char. *The Clustering Approach to Better Essay Writing*. New York: Trillium Press, Inc., 1987.

Lawrence Erlbaum Associates, Inc. *Teaching Critical Thinking*. Hillsdale, NJ: Lawrence Erlbaum Associates, Inc. (bimonthly publication).

Lawrence, Mary S. *Writing as a Thinking Process*. Ann Arbor: The University of Michigan Press, 1984.

McCarthy, Thomas. *The Critical Theory of Jurgen Habermas*. Cambridge, MA: MIT Press, 1981.

Nickerson, Raymond. *Reflections on Reasoning*. Hillsdale, NJ: L. Erlbaum Assocs., 1986.

Paul, Richard, et al. *Critical Thinking Handbook: 4th-6th Grades*. Rohnert Park, CA: Sonoma State University, 1990.

Paul, Richard, et al. *Critical Thinking Handbook: 6th-9th Grades*. Rohnert Park, CA: Sonoma State University, 1989.

Paul, Richard, et al. *Critical Thinking Handbook: High School*. Rohnert Park, CA: Sonoma State University, 1989.

Perrone, Vito, ed. *Expanding Student Assessment*. Alexandria, VA: Association for Supervision and Curriculum Development, 1991.

Raths, L.E., et al. *Teaching for Thinking*. New York: Teachers College, Columbia University, 1986.

Shor, Ira. *Critical Teaching in Everyday Life*. Boston: South End Press, 1987.

Von Dech, Roger. *A Kick in the Seat of the Pants*. New York: Harper and Row, 1986.

Von Dech, Roger. *A Whack on the Side of the Head: How to Unlock Your Mind for Innovation*. New York: Warner Books, 1983.

Young, Robert E., ed. *Fostering Critical Thinking*. San Francisco: Jossey-Bass, Inc., 1980.

Media

Reprinted with permission from *Developing Minds: A Resource Book for Teaching Thinking*. Arhtur L. Costa, ed., Alexandria, VA: Association for Supervision and Curriculum Development, 1985, pp. 305-306.

Beyond the Three R's—Reasoning and Responsibility. Audiocassette. Jane Stallings accounts for how we teach children to ask key questions and what concepts—not merely facts and figures—we want them to learn. Alexandria, VA: Association for Supervision and Curriculum Development, 1984.

Direct Instruction and Teaching for Thinking. Theme issue of *Educational Leadership.* Articles by Bruce Joyce, John Barrell, Richard Paul, and Stephen Norris explaining the relationship between effective teaching and critical thinking. Alexandria, VA: Association for Supervision and Curriculum Development, May 1985.

Improving the Quality of Student Thinking. Videotape. Ron Brandt encourages teachers to analyze their own teaching to improve student thinking skills. Features actual classroom episodes, statements by researchers, psychologists, and other authorities. Alexandria, VA: Association for Supervision and Curriculum Development, 1984.

Problem Solving. Theme issue of *Educational Leadership.* Arthur Whimbey on paired problem solving; two articles on Instrumental Enrichment. Alexandria, VA: Association for Supervision and Curriculum Development, April 1980.

Put Some Thinking in Your Classroom. Sound filmstrip series by Selma Wasserman. Westchester, IL: Benefic Press, 1978.

Tactics for Thinking. Video-supported training program. A 22-unit program for training K-12 teachers in all subject areas in the teaching of mental tactics to help students take control of their own learning throughout their lives. The 22 skills, or tactics, fall into three categories: learning to learn skills (attention control, deep processing, goal setting), content thinking skills (pattern recognition, synthesizing, proceduralizing), and reasoning skills (analogical reasoning, nonlinguistic patterns, solving everyday problems, solving academic problems, invention). Developed by Robert J. Marzano and Daisy E. Arredondo. Alexandria, VA: Association for Supervision and Curriculum Development, 1986.

Talks on Teaching Thinking. Audiocassettes. A set of seven tapes covering strategies that have emerged from research. Features Barry Beyer, "Practice is Not Enough;" Sandra Black, "Survey of the Thinking Skills Movement;" Ron Brandt, "Approaches to Teaching Thinking;" Arthur Costa, "Classroom Conditions that Encourage Student Thinking;" Edward de Bono, "Thinking as a Skill;" David Perkins, "Knowledge as Design;" and Robert Sternberg, "Teaching for Problem Solving in the Real World." Alexandria, VA: Association for Supervision and Curriculum Development, 1985.

Teaching Reading as Thinking. Videotape. Explains how research on teaching thinking can help teachers improve student reading abilities in all content areas, K-12. Features Annemarie Palincsar, Donna Ogle, Beau Fly Jones. Alexandria, VA: Association for Supervision and Curriculum Development, 1986.

Teaching Skillful Thinking. Videotape. A four-part program to help teachers plan ways to emphasize thinking throughout the curriculum, features Ernest Boyer, David Perkins, Matthew Lipman, and others. Alexandria, VA: Association for Supervision and Curriculum Development, 1986.

Teaching Thinking in Elementary Schools. Audiocassettes. A set of five tapes presents a framework for teaching thinking in elementary schools. Features Ron Brandt and David Perkins, "Analyzing Approaches to Teaching Thinking;" Richard Paul, "Critical Thinking in Elementary School;" Barry Beyer, "Planning a Thinking Skills Program;" Esther Fusco and John Berell, "The Development of Children's Thinking and Teaching Thinking in River Edge, New Jersey, Schools;" and Arthur Costa, "What Human Beings Do When They Behave Intelligently." Alexandria, VA: Association for Supervision and Curriculum Development, 1987.

Teaching Thinking Throughout the Curriculum. Educational Leadership on Tape. Recorded articles by Barbara Presseisen, Barry Beyer, John Barell, and others. Alexandria, VA: Association for Supervision and Curriculum Development, 1988.

Teaching Thinking Skills. Theme issue of *Educational Leadership.* Includes symposium on brain research, articles by Robert Sternberg, Ray Nickerson, Arthur Costa, Sydelle Seiger-Ehrenberg, and others. Alexandria, VA: Association for Supervision and Curriculum Development, October 1981.

Thinkabout. Television series for school use. Designed to help students experience and become aware of their thinking and problem-solving processes. Bloomington, IN: Agency for Instructional Television.

Thinking Skills in the Curriculum. Theme issue of *Educational Leadership.* Articles by Richard Paul on critical thinking, Matthew Lipman on reasoning, Robert Sternberg on intelligence, Edward de Bono on thinking as a skill, and David Perkins on creativity. Alexandria, VA: Association for Supervision and Curriculum Development, September 1984.

When Teachers Tackle Thinking Skills. Theme issue of *Educational Leadership.* Arthur Costa, Irving Sigel, Carol Booth Olson, Meredith Gall, and others discuss ways to help teachers prepare to teach thinking. Alexandria, VA: Association for Supervision and Curriculum Development, November 1984.

Why in the World? Television series by Elinor Richardson and Carlos E. Cortes. Uses national and international current events to stimulate critical analyses in high school students. Los Angeles: KCET Agency for Public Broadcasting.

Newsletters

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Cerebretics Society International. c/o Leslie A. Hart, 120 Pelham Road, 6-C, New Rochelle, NY 10805.

Cogitare. Newsletter of the Thinking Skills Network sponsored by Association for Supervision and Curriculum Development. c/o John Barell, Montclair State College, Upper Montclair, NJ 07043.

Cognition and Instruction. Lawrence Erlbaum Associates, Publishers, 365 Broadway, Suite 102, Hillsdale, NJ 07642.

Human Intelligence International Newsletter. Oakland University, 544 O'Dowd Hall, Rochester, MI 48063.

Informal Logic. University of Windsor, Department of Philosophy, Windsor, Ontario, Canada N9B 3P4.

Learning Styles Network. St. John's University, Jamaica, NY 11439.

Mind-Brain Bulletin. Interface Press, P.O. Box 4221, 4717 N. Figueroa Street, Los Angeles, CA 90042.

Noetic Sciences Newsletter. Institute of Noetic Sciences, 2820 Union Street, San Francisco, CA 94123.

On the Beam. New Horizons for Learning, P.O. Box 51140, Seattle, WA 98115.

The Philosophy for Children Newsletter. The First Mountain Foundation, Box 196, Montclair, NJ 07042.

Problem Solving. Franklin Institute Press, 20th and Race Streets, Box 2266, Philadelphia, PA 19103.

Professional Journal of Record: Informal Logic. Edited by Johnson and Blair. University of Windsor, Ontario, Canada N9B 3P4.

SOI Newsletter. SOI Institute, 343 Richmond Street, El Sequndo, CA 90245.

The Teaching Thinking and Problem Solving Newsletter. Research for Better Schools, 444 N. Third Street, Philadelphia, PA 19123.

Thinking and Skills Newsletter. Pennsylvania Department of Education, c/o Stephanie Bowen or John Meehan, Harrisburg, PA.

Networks and Professional Associations

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Association for Supervision and Curriculum Development Thinking Skills Network. c/o John Barrell, Montclair State College, Upper Montclair, NJ 07042.

Research for Better Schools. c/o Barbara Presseisen, 444 N. Third Street, Philadelphia, PA 19123.

The Association for Informal Logic and Critical Thinking. Professor David Hitchcock, President, McMaster University, Canada.

National Council for Excellence in Critical Thinking Instruction. c/o Richard Paul, Center for Critical Thinking, Sonoma State University, Rohnert Park, CA 94928.

New Horizons for Learning. P.O. Box 51140, Seattle, WA 98115.

Appendix Y

Resources/Educational Equity

Local Organizations

To contact local or community-based organizations suggested on the following list, we recommend the local telephone directory be consulted first. Contact the organization's state office or your local school district office for the address and telephone number of the local affiliate or contact person.

The following is a partial list of groups to consider when seeking public input and support:

American Association of University Women
Bilingual/National Origin Advisory Committees
Hispanic Associations
Hmong/Lao Associations
Home-School Coordinators
Human-Growth and Development Advisory Committees
Indian Education Parent Advisory Committees
League of Women Voters
Migrant Organizations
National Association for the Advancement of Colored People
Parent-Teacher Organizations'
Tribal Education Directors
Urban League
Vietnamese Associations

Listed here are addresses for some local groups.

African-American

Africian American Children's Society
5770 Williamsburg Way
Madison, WI 53719
(608) 274-2509
Karen Donald, President

Concerned Parents Association
4111 30th Avenue
Kenosha, WI 53140
(414) 657-3245 (Perry White)
(414) 654-5263

Kenosha Branch Urban League
1607 65th Street
Kenosha, WI 53142
(414) 652-2111

Milwaukee Urban League, Inc.
2800 West Wright Street
Milwaukee, WI 53210
(414) 374-5850

Minority Parent Organization
2032 Linway Drive
Beloit, WI 53511
(608) 365-4664
Gail Sloan, Secretary

Madison Urban League, Inc.
151 East Gorham Street
Madison, WI 53703
(608) 251-8550

Metropolitan Milwaukee Alliance of
Black School Educators (MMABSE)
P.O. Box 12520
Milwaukee, WI 53212

Urban League of Racine & Kenosha, Inc.
718 North Memorial Drive
Racine, WI Kenosha, WI 53142
(414) 552-7119 (414) 553-9979

Wisconsin Association of Black State
Employees
P.O. Box 254
Madison, WI 53701

National Association for the Advancement of Colored People

Beloit Branch
1224 4th
Beloit, WI 53511
(608) 362-2800

Kenosha Branch
1607 65th Street
Kenosha, WI 53142
(414) 652-2111

Madison Branch
P.O. Box 9034
Madison, WI 53715
(608) 255-1839

Milwaukee Branch
2209 Dr. Martin Luther King Drive
Milwaukee, WI 53212
(414) 263-1000

Racine Branch
Corrine Owens
2611 Ohio
Racine, WI 53405
(414) 554-1068

Gay/Lesbian

Counseling Center of Milwaukee
1428 North Farwell Avenue
Milwaukee, WI 53202
(414) 271-2565

Friends for Lesbian and Gay Concerns
Quaker Church
(608) 244-3898

Gamma Alpha Iota (GAI)
Lawrence University
P.O. Box 599
Appleton, WI 54912
(414) 735-6595

Gay/Lesbian Employees of Madison Area
School District
Madison Teachers, Inc.
(608) 257-0491

Gay/Lesbian Info Line, Tape 3333
(608) 263-3100

Gay/Lesbian Information and Support
ALL-GAYS Phoneline
(608) 255-4297

Gay and Lesbian Alliance (GALA)
Box 111
Platteville, WI 53818
(608) 348-4057

Gay Youth Milwaukee (GYM)
P.O. Box 09441
Milwaukee, WI 53209
(414) 265-8500

Parents and Friends of Lesbians and Gays
P.O. Box 1818
Fond du Lac, WI 54935
(414) 921-7191

Parents and Friends of Lesbians and Gays
c/o Gay and Lesbian Resource Center
P.O. Box 1722
Madison, WI 53701
(608) 271-0270
(608) 255-0533

I GLOW
P.O. Box 363
Rice Lake, WI 54868

Lambda Connection
1220 North Oakwood Road
Oshkosh, WI 54904
(414) 231-5075

Madison Gay and Lesbian Resource Center
P.O. Box 1722
Madison, WI 53701
(608) 257-7575

Madison Youth Project
c/o the United
P.O. Box 310
Madison, WI 53701
(608) 255-8582

The United
P.O. Box 310
Madison, WI 53701
(608) 255-8582

Hispanic

Centro Hispano-Kenosha
1212 57th Street
Kenosha, WI 53140
(414) 658-1063

Centro Hispano-Madison
Dora Silva, Director
112 North Fairchild
Madison, WI 53703
(608) 255-3018

Centro Hispano-Racine
720 17th Street
Racine, WI 53403
(414) 637-7931

Community Enrichment Center
2669 North Richards
Milwaukee, WI 53212
(414) 562-8398

Comunidad de Amigos
901 Superior Avenue
Sheboygan, WI 53081
(414) 452-7331

Council for the Spanish Speaking, Inc.
Spanish Center (Guadalupe Center)
614 West National Avenue
Milwaukee, WI 53204
(414) 384-3700

Kenosha Spanish Center
1212 57th Street
Kenosha, WI 53140
(414) 658-1063

La Casa de Esperanza, Inc.
Fred Gutierrez, Executive Director
410 Arcadia Avenue
Waukesha, WI 53186
(414) 547-0887

United Community Center
1028 South 9th Street
Milwaukee, WI 53204
(414) 384-3100

Migrant

United Migrant Opportunity Programs
(state)
P. O. Box 04129
809 W. Greenfield Avenue
Milwaukee, WI 53204
(414) 671-5700

LaGuadalupana
805 South Fifth Street
Milwaukee, WI 53204
(414) 384-2301

United Migrant Opportunity Programs in: Beaver Dam, Kenosha, Sheboygan, Green Bay, Madison, Wautoma, Hartford, Manitowoc

Refugee

American/Hmong Friendship
2414 West Vliet Street
Milwaukee, WI 53205
(414) 344-6575

Eau Claire Hmong Association
1624 Bellinger Street
Eau Claire, WI 54703
(715) 832-8420

Fox Valley Lao/Hmong Association
c/o West Shell YMCA
101 West Edison Street
Appleton, WI 54915
(414) 739-7244

Green Bay Hmong Association
401 Ninth Street
Green Bay, WI 54304
(414) 432-8900

La Crosse Area Hmong Mutual
Assistance Association
2615 George Street
La Crosse, WI 54603
(608) 781-5744

Lao Family Community, Inc.
1420 West Scott Street
Milwaukee, WI 53204
(414) 383-4180

Oshkosh Lao/Hmong Association, Inc.
2929 Harrison Street
Oshkosh, WI 54901
(414) 426-0150

Sheboygan Hmong Mutual Assistance
Association
1405 North 13th Street
Sheboygan, WI 53081
(414) 458-0808

Southern Lao/Hmong Association
2037 Baird Street
Madison, WI 53713
(608) 257-2079

United Refugee Services
c/o Lutheran Social Services
P.O. Box 9554
1405 E. Dayton Avenue, Room 303
Madison, WI 53704
(608) 244-6680

Vietnamese-American Friendship
Association
3110 West 29th Court
La Crosse, WI 54601
(608) 788-4018

Vietnamese Mutual Assistance Assocation
of Wisconsin/Milwaukee
3124 South 18th Street
Milwaukee, WI 53215
(414) 643-4745

Vietnamese Sponsorship Association
of Madison
1022 West Badger Road, Apt. A
Madison, WI 53713

Wausau Area Hmong Mutual Association
1109 North 6th Street
Wausau, WI 54401
(715) 842-8390

Tribal

Bad River Education Program
P.O. Box 39
Odanah, WI 54861
(715) 682-5308

Forest County Potawatomi Education Program
Forest County Potawatomi Education Department
P.O. Box 346
Crandon, WI 54520
(715) 478-2903

Lac Courte Oreilles Education Program
Route 2
Hayward, WI 54834
(715) 634-4299

Lac du Flambeau Education Program
P.O. Box 67
Lac du Flambeau, WI 54538
(715) 588-3303, ext. 215

Menominee Tribal Education Program
P.O. Box 397
Keshena, WI 54135
(715) 799-3846

Oneida Tribal Education Program
P.O. Box 365
Oneida, WI 54155
(414) 869-217

Red Cliff Tribal Education Program
Route 1, Box 529
Bayfield, WI 54814
(715) 779-5288

St. Croix Education Program
Tribal Center
Hertel, WI 54830
(715) 866-5291

Sokaogon Chippewa Education Program
Route 1, Box 625
Crandon, WI 54520
(715) 478-2604

Stockbridge-Munsee Education Program
Stockbridge-Munsee Library/Museum
Route 1
Bowler, WI 54416
(715) 793-4100

Wisconsin Winnebago Business Committee
Education Program
P.O. Box 311
Tomah, WI 54660
(608) 372-4147

State Organizations

African American

(See addresses in local listings)

American Indian

American Indian Language and Culture Education Board
Department of Public Instruction
125 South Webster Street
P.O. Box 7841
Madison, WI 53707-7841
(608) 267-9232

Wisconsin Indian Education Association
P.O. Box 397
Keshena, WI 54135
(715) 799-3841—Virginia Nuske

Gay/Lesbian

NOW-Wisconsin Lesbian Rights Task Force
c/o 312B Plainfield Avenue
Milwaukee, WI 53207

Handicap

Association for Retarded Citizens in Wisconsin
John Nelson, Executive Director
121 South Hancock Street
Madison, WI 53703
(608) 251-9272

Council of Administrators of Pupil Services (CAPS)
Steve Japuntich, President
Director of Pupil Services
P.O. Box 70
Phillips, WI 54555
(715) 339-2141

Council for Exceptional Children—Wisconsin Federation 525
Mary Bross, President
Route 5, Box 79
Whitewater, WI 53190
(414) 473-4831

Learning Disabilities Association of Wisconsin
P.O. Box 153
Athens, WI 54411
(715) 257-7510

Wisconsin Association for Children With Behavior Disorders
Linda Sumwalt, Representative
36549 Highway C
Dousman, WI 53118
(414) 965-2814

Wisconsin Council of Administrators of Special Education
David Ament, President
Baraboo School District
101 2nd Avenue
Baraboo, WI 53913
(608) 355-3955

Migrant

Legal Action of Wisconsin
31 South Mills Street
Madison, WI 53706
(608) 256-3304

United Migrant Opportunity Services, Inc.
P.O. Box 04129
809 West Greenfield Avenue
Milwaukee, WI 53204
(414) 671-5700

National Origin/Bilingual

Wisconsin Association for Bilingual Education
Bilingual-Bicultural Program
Department of Public Instruction
125 South Webster Street
P.O. Box 7841
Madison, WI 53707-7841
(608) 267-9234—Bilingual
(608) 266-5469—National Origin

Wisconsin Association for Bilingual/Bicultural Education
Audrey Haines, Director
Kenosha Public Schools
3600 52nd Street
Kenosha, WI 53144
(414) 656-6378

Parental

Wisconsin Congress of Parents and Teachers (PTA)
4797 Hayes Road, Suite 2
Madison, WI 53704-3256
(608) 244-1455
Ginny Hicks, President

Women

League of Women Voters of Wisconsin
122 State Street
Madison, WI 53703
(608) 256-0827

Links
1102 Frisch Road
Madison, WI 53705
(608) 271-3555
Darlene Hancock

National Organization for Women
122 State Street
Madison, WI 53703
(608) 255-3911

Sex Equity in Education Coalition
c/o Judith A. Kneece
1705 Eastwood Avenue
Janesville, WI 53545
(608) 756-2045

Wisconsin Consortium for Sex Equity in Education
c/o Shirley Jane Kaub
609 Sheldon Street
Madison, WI 53711
(608) 233-5223

Wisconsin Minority Women's Network
P.O. Box 249
Madison, WI 53701
(608) 231-2171
Lakshmi Sridharan, President

Wisconsin Women's Council
16 North Carroll Street
Madison, WI 53703
(608) 266-2219

Wisconsin's Women's Network
Educational Equity Task Force
122 State Street
Madison, WI 53703
(608) 255-9809

Women In Focus, Inc.
P.O. Box 4013
Madison, WI 53711
(608) 271-5747
Rose Ann Brown, President

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